

MATERIAL REVIEWED AT CIA HEADQUARTERS BY
HOUSE SELECT COMMITTEE ON ASSASSINATIONS STAFF MEMBERS

FILE TITLE/NUMBER/VOLUME: Kirkdale, B.C.
OF FILE

INCLUSIVE DATES:

CUSTODIAL UNIT/LOCATION: _____

ROOM: _____

DELETIONS, IF ANY: PERSONAL MATERIAL 4 SENSITIVE OPS

NO DOCUMENTS MAY BE COPIED OR REMOVED FROM THIS FILE

14-00000

Personal - Post agency
activity

SECRET

DATE PREPARED

26 FEBRUARY 1970

REQUEST FOR PERSONNEL ACTION								
1. SERIAL NUMBER	2. NAME (Last-First-Middle)							
027630	HIDALGO, BARTHOLOME N. JR.							
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE REQUESTED						
RETIREMENT (DISABILITY) UNDER CIA RETIREMENT DISABILITY SYSTEM		MONTH	DAY	YEAR	REGULAR			
X		02	28	70	5. FINANCIAL ANALYSIS NO: CHARGEABLE			
6. FUNDS		OP TO C	OP TO C	OP TO C	6. FINANCIAL ANALYSIS NO: CHARGEABLE			
7. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION						
DDP/WH BRANCH 2 PANAMA SECTION		WASHINGTON, D.C.						
11. POSITION TITLE				12. POSITION NUMBER	13. CAREER SERVICE DESIGNATION			
OPS OFFICER				1318	D.			
14. CLASSIFICATION SCHEDULE (GS, ETC.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP	17. SALARY OR RATE			
GS		0136.01		12 5	\$15,173			
18. REMARKS SUBJECT HAS SIGNED WAIVER FOR SICK AND ANNUAL LEAVE ACCUMULATING AFTER 28 FEBRUARY 1970. NOT Recommended in Agency Reserve Program due to Health of Subject See B. Duley, KC L.H./PGS								
19. SIGNATURE OF REQUESTING OFFICIAL HENRY L. BERTHOLD, CIA/H/PERS				DATE SIGNED 2/26/70	20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER Pete M. Hayes			
21. SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL								
19. ACTION CODE	20. EMPLOY CODE	21. DATE CODING NUMERIC	22. STATION CODE	23. INTEGEE CODE	24. MOISER CODE	25. DATE OF BIRTH MM DD YY	26. DATE OF GRADE MM DD YY	
45 10						35 27 19		
28. DATE EXPIRES MM DD YY		29. SPECIFIC REFERENCE 1-LSC 2-DRG 3-FICA 4-RATE		30. RETIREMENT DATA CODE	31. SEPARATION DATA CODE	32. CORRECTION CANCELLATION DATA TYPE	33. SECURITY REQ NO	
35. RET. PREFERENCE CODE 0-NONE 1-5 PT 2-10 PT		36. GEM COMP DATE MM DD YY		37. LONG COMP DATE MM DD YY	38. CAREER CATEGORY SAB BISH PROV TEMP	39. FEGIT HEALTH INSURANCE CODE 0-REFEE 1-YES	40. SOCIAL SECURITY NO	
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE LESS THAN 3 YEARS 3-BREAK IN SERVICE MORE THAN 3 YEARS		42. LEAVE CAT CODE		43. FEDERAL TAX DATA FORM EXECUTED 1-IRS 2-DO	44. STATE TAX DATA FORM EXECUTED 1-IRS 2-DO	45. C.P. APPROVAL Signature: [Signature]	DATE APPROVED 3/1/70	
46. POSITION CONTROL CERTIFICATION Signature: [Signature]								

SECRET

EMPLOYEE NOTICE OF RESIGNATION

RESIGN EFFECTIVE

FOR THE FOLLOWING REASON

Mar 2

10-20-1970

MY LAST WORKING DAY WILL BE

DATE SIGNED

SIGNATURE OF EMPLOYEE

FORWARD COMMUNICATIONS, INCLUDING SALARY CHECKS AND BONDS, TO THE FOLLOWING ADDRESS (Number, Street, City, State, Zip Code)

403 Silver Rock Rd.
Rockville, Maryland 20851

INSTRUCTIONS

Items 1 thru 7, and Items 9 thru 18a } The initiating office should fill in each of the referenced items. Items 3 thru 7 and 9 thru 18 require information which pertains *only* to the action requested, and NOT to the current status of the employee unless specific items remain unchanged.

Item 5 - "Category of Employment" should show one of the following entries:

Regular	Summer	WAE
Part Time	Detail Out	Consultant
Temporary	Detail In	Military
Temporary-Part Time		

Item 9 - "Organizational Designations" should show *all* levels of organization pertinent to identifying the location of the position:

Major Component (Director, Deputy Director, etc.)
Office, Major Staff, etc.

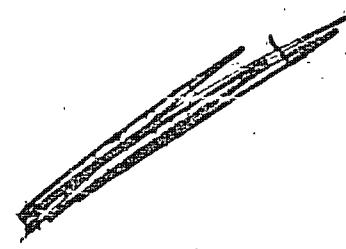
Foreign Field or U.S. Field (*if pertinent*)
Division or Staff (*subordinate to first line*)
Branch
Section
Unit

Items 11 and 15 - "Position Title" and "Occupational Series" should be the standard abbreviated title and corresponding occupational series in Handbook of Official Occupational Titles and Codes for the duties actually to be performed by the employee. If different from the title and series of the position occupied as shown on the most current edition of the Position Control Register or form 261, Staffing Complement Change Authorization, explain under Item 18-Remarks.

Item 18b - Signature should be that of the official authorized to approve for the Career Service to which the employee belongs. If more than one Career Service is involved, *the* *gaining* *Career Service should approve* and the other Career Service should concur in Item 18, Remarks.

ROUTING - The original only of this form will be forwarded to the Office of Personnel *through* the appropriate Career Service official(s). In the case of requests specified in HB 20-800-1, which require advance approval of or notification to the Office of Security or the Office of Finance, one copy only will be sent to the Office(s) concerned.

SECRET



MEDICAL

25 JUL 1969

MEMORANDUM FOR: Mr. Balmes N. Hidalgo, Jr.

SUBJECT : Exceptional Service Emblem

1. Your request for consideration to receive the Exceptional Service Emblem has been reviewed by this office to determine your eligibility for the award. With considerable regret, I must concur in the assessment that the injuries you suffered in the line of duty do not fall under the special criteria governing award of the Exceptional Service Emblem. Hazardous duties, in the meaning of the governing regulation, relate to duties performed in areas in which internal strife, civil disturbances or hostile action by armed forces or persons unfriendly to the United States were present at the time the injury was incurred, or, relate to duties performed in an assignment defined as hazardous due to unusual geographic or other natural conditions.
2. You may be sure that this decision has been based upon thoughtful deliberation. Please accept my personal thanks for a job well done under difficult conditions.

Robert S. Wattles
Robert S. Wattles
Director of Personnel

Distribution:

- 0 - Addressee
- 1 - C/WH/Pers
- 1 - OPF/Hidalgo
- 1 - D/Pers
- 2 - BSD/HMAB

S E C R E T

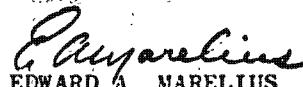
24 June 1969

MEMORANDUM FOR: Balmer M. Hidalgo

VIA : WH/RMO

SUBJECT : Records Officer Appointment

1. In accordance with a request received from your component, you are hereby appointed a Records Officer in the Clandestine Services. Your functions are described, in summary, in CSI 70-1, Para. 4.d. You have also participated in a training course in which these functions were reviewed in some detail.
2. The essence of your appointment is that you now occupy a position of trust in which you are expected to draw on your knowledge and experience to exercise responsible and sound judgment in building and maintaining a professionally useful records system in the Clandestine Services. You are, at the same time, expected to train and guide others within your component in these respects.
3. A copy of this memorandum will be placed in your official personnel folder.



EDWARD A. MARELIUS
DDP Records Management Officer

cc: Personnel File of Addressee

S E C R E T

GROUP I
Excluded from automatic
downgrading and
declassification

14-00000

SENSITIVE OPERATIONALS

1968

SECRET

6-38

(B) Nov. 1964 (Rev. 10-64)

DATE PREPARED

10 August 1966

REQUEST FOR PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (Last - First - Middle)		4. EFFECTIVE DATE REQUESTED			5. CATEGORY OF EMPLOYMENT		
027630		HIDALGO, ELMER N., JR.		MONTH	DAY	YEAR	REGULAR		
6. FUNDS		<input checked="" type="checkbox"/> V TO V <input type="checkbox"/> V TO C <input type="checkbox"/> CP TO V <input type="checkbox"/> CP TO C		08	14	66	7. COST CENTER NO CHARGEABLE		
8. ORGANIZATIONAL DESIGNATIONS		DDP/WB		10. LOCATION OF OFFICIAL STATION			8. LEGAL AUTHORITY (Completed by Office of Personnel)		
				WASHINGTON, D.C.			PL 88-643 Sect. 203		
11. POSITION TITLE				12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION			
						D			
14. CLASSIFICATION SCHEDULE (GS, E.B., etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE		
					12		\$		
18. REMARKS YOU ARE HEREBY NOTIFIED OF YOUR RIGHT TO APPEAL THIS ACTION TO THE DIRECTOR OF CENTRAL INTELLIGENCE IN ACCORDANCE WITH THE PROVISIONS OF HR 20-50. SUCH APPEAL MUST BE RECEIVED IN THE OFFICE OF THE DIRECTOR WITHIN 30 CALENDAR DAYS FROM THE EFFECTIVE DATE OF THIS ACTION.									
18A. SIGNATURE OF REQUESTING OFFICIAL			DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER			DATE SIGNED	
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING NUMERIC	22. STATION CODE ALPHABETIC	23. INTEGRATE CODE	24. MOOTRS CODE	25. DATE OF BIRTH MO. DA. YR	26. DATE OF GRADE MO. DA. YR	27. DATE OF LEI MO. DA. YR	
20. RITE EXPIRES MO DA YR	29. SPECIAL REFERENCE 1-15 2-16 3-17 4-18	30. RETIREMENT DATA CODE 2	31. SEPARATION DATA CODE 1-15 2-16 3-17 4-18	32. CORRECTION CANCELLATION DATA TYPE 1-15 2-16 3-17 4-18	33. SECURITY REQ. NO	34. SSI			
35. VET. PREFERENCE CODE 0-HOME 1-1 PT 2-10 PT	36. SERV. COMP. DATE MO DA YR	37. LONG COMP. DATE MO DA YR	38. CAREER CATEGORY CAB REG PROV-TEMP	39. FEGLI HEALTH INSURANCE CODE 0-HOME 1-15	40. SOCIAL SECURITY NO				
41. PREVIOUS GOVERNMENT SERVICE DATA CODE 0-NO PREVIOUS SERVICE 1-NO BREAK IN SERVICE 2-BREAK IN SERVICE (LESS THAN 2 YEARS) 3-BREAK IN SERVICE (MORE THAN 2 YEARS)	42. LEAVE CAT CODE	43. FEDERAL TAX DATA CODE 1-75 2-80	44. STATE TAX DATA CODE 1-75 2-80	45. STATE CODE CODE 1-75 2-80					
46. POSITION CONTROL CERTIFICATION P-16-64-11				47. O.P. APPROVAL See memo signed by D/Pers dated 26 JUL 1966		DATE APPROVED			

SECRET

DATE PREPARED

10 DECEMBER 1965

REQUEST FOR PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME / GRADE/ PAY GRADE		3. EFFECTIVE DATE/ROUTINE		4. CATEGORY OF EMPLOYMENT		
027630		HIDALGO, BALTES N.		DEC 19 65		REGULAR		
5. NAME OF PERSONNEL ACTION		6. PAY GRADE		7. PAY CENTER/NO. CHARGE		8. LEGAL AUTHORITY (Explain by Date of		
REASSIGNMENT		X V10 V C1 TO V		V10 G G10 G		Purchasing		
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION		11. POSITION TITLE		12. POSITION NUMBER		
DOP/WH BRANCH 2 PANAMA SECTION		WASHINGTON, D. C.		OPS OFFICER		1318		
14. CLASSIFICATION SCHEDULE (GS, F.B., ETC.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE		
GS		0136.01		12 2		S-10,987		
18. REMARKS FROM: WH/C/MIAMI OPS BR/FI SECTION/5235 - 1162/1145/WASHINGTON, D. C.								
Recorded by CSPD Sgt								
1 - FINANCE								
19A. SIGNATURE OF REQUESTING OFFICIAL		DATE SIGNED		23. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED		
ROBERT D. CASHMAN C/WH/PERSONNEL		10/26/65		M. S. CASHMAN				
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL								
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING NUMERIC	22. STATE CODE	23. INTEGRATE CODE	24. ROUTE CODE	25. DATE OF BIRTH MO DA YE	26. DATE OF GRADE MO DA YE	27. DATE OF LEE MO DA YE
37	16	7-330	004	12012				
28. SITE EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATE MO DA YE	31. SEPARATION DATE CODE	32. CORRECTION DATE CODE	33. CANCELLATION DATE CODE	34. SECURITY REG. NO.	35. SET
			1-CX 3-FCA 5-ADM					
36. VET PREFERENCE		37. SERV. COMP. DATE CODE	38. LONG COMP. DATE MO DA YE	39. CAREER LIFETIME LAB. REG. CODE	40. REG. MEDICAL INSURANCE CODE	41. STATE TAX DATA CODE	42. SOCIAL SECURITY NO.	
0-NO 1-1 PT 2-10 PT		MO DA YE	MO DA YE	REG. TEMP	REG. MEDICAL	REG. STATE		
43. PREVIOUS GOVERNMENT SERVICE DATA		44. LEAVE CAT CODE	45. FEDERAL TAX DATA CODE	46. STATE TAX DATA CODE	47. C.P. APPROVAL			DATE APPROVED
0-0 PREVIOUS SERVICE 1-0 DEATH IN SERVICE 2-DEATH IN SERVICE (LESS THAN 3 YEARS) 3-DEATH IN SERVICE (MORE THAN 3 YEARS)			NO TAX EXEMPTIONS 1-YES 2-NO	NO TAX EXEMPTIONS 1-YES 2-NO				10/26/65
48. POSITION CONTROL CERTIFICATION								

CONFIDENTIAL
(When Filled In)

NOTICE OF LONGEVITY COMPUTATION DATE

NAME (Last, First, Middle)

HIDALGO B. N. Jr.

VOUCHERED

UNVOUCHERED

SERIAL NUMBER:

097630

OFFICE (AND DIVISION)

DDP/ WH

ORIGINAL	LONGEVITY COMPUTATION DATE
X CORRECTION	02-18-572
THIS DATE:	SIGNATURE (Office of Personnel)
12-13-65	<i>J. C. Bellas</i>

FORM 171a
11-68

CONFIDENTIAL

(4)

SECRET

(b) (6) (A) (7) (D) (E) (F)

REQUEST FOR PERSONNEL ACTION								DATE PREPARED			
1. ITEM NUMBER	NAME 11/28/64 D-1000							23 October 1964			
2. DATE	11/28/64										
3. NATURE OF PERSONNEL ACTION			4. EFFECTIVE DATE REQUESTED		5. CATEGORY OF EMPLOYMENT						
6. FUNDS			6. FUNDING SOURCE	7. COST CENTER NO. CHARGEABLE	8. LEGAL AUTHORITY (Excluded by Office of Personnel)	9. PERIOD OF EMPLOYMENT					
8. FUNDS			V TO V	V 10.0	275-1162	10. LOCATION OF OFFICIAL STATION					
9. ORGANIZATIONAL DESIGNATIONS			11. POSITION TITLE		12. POSITION NUMBER	13. CAREER SERVICE DESIGNATION					
10. ORGANIZATIONAL DESIGNATIONS			OPEN OFFICER		037	D					
11. POSITION TITLE			12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION						
14. CLASSIFICATION SCHEDULE (G-1, G-2, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP	17. SALARY OR RATE					
15. OCCUPATIONAL SERIES			015-01		12 (1)	10,300					
18. REMARKS								10/28/64			
From: DPP/510/23/S Rev. 0 <i>10/28/64</i>								10/28/64			
Second, 11/28/64								10/28/64			
19. SIGNATURE OF REQUESTING OFFICIAL								20. DATE SIGNED	188. SIGNATURE OF CAREER SERVICE APPROVING OFFICER	21. DATE SIGNED	
<i>John D. Dugay</i>								10/29/64		10/30/64	
22. SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
23. ACTION CODE	24. EMPLOY CODE	25. OFFICE CODING	26. STATION CODE	27. INTEGEE CODE	28. MOONS CODE	29. DATE OF BIRTH	30. DATE OF GRADE	31. DATE OF LEI			
37	10	49150 515	75013	1	05	27/14					
29. DATE EXPIRES		30. SPECIAL REFERENCE	31. RETIREMENT DATA	32. SEPARATION DATA CODE	33. CORRECTION CANCELLATION DATA	34. TYPE	35. MO. DA. YR	36. MO. DA. YR	37. MO. DA. YR	38. MO. DA. YR	39. MO. DA. YR
MO. DA. YR		1-CX 2-FB 3-MORE	CODE								
40. VET PREFERENCE		41. SERV. COMP. DATE	42. LONG COMP. DATE	43. CAREER CATEGORY	44. FIGHT. HEALTH INSURANCE	45. MO. DA. YR	46. SOCIAL SECURITY NO				
CODE		MO. DA. YR	MO. DA. YR	CAR. BESY PROV. TEMP	CODE	CODE	47. B- BESY - PROV	48. HEALTH INS. CODE			
47. PREVIOUS GOVERNMENT SERVICE DATA		48. LEAVE CAT. CODE	49. FEDERAL TAX DATA	50. STATE TAX DATA							
CODE		0- NO PREVIOUS SERVICE 1- 1-5 PT 2- 6-10 PT 3- MORE		51. FORM EXECUTED 1- YES 2- NO	52. MO. TAX EXEMPTIONS --	53. FORM EXECUTED 1- YES 2- NO	54. CODE	55. NO TAX EXEMPT 56. STATE CODE			
57. POSITION CONTROL CERTIFICATION		58. O.P. APPROVAL	59. DATE APPROVED								
60. FORM 1152 USE PREVIOUS EDITION											
61. SECRET											
62. GROUP 1 EXCLUDED FROM AUTOMATIC DOWNGRADING AND DECLASSIFICATION											

SECRET

DATE PREPARED

2/25/64 1000

REQUEST FOR PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (Last-First-Middle)		3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE REQUESTED		5. CATEGORY OF EMPLOYMENT	
027437		EDDICO, B. N. Jr.		EXCITED APPOINTMENT (Contract)		MONTH DAY YEAR		REGULAR	
6. FUNDS		7. V TO V	8. V TO O	9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION		11. POSITION TITLE	
X		✓	✓	EOP Special Affairs Staff 03/03 Development Complement		Washington, D.C.		OP OFFICIAL	
14. CLASSIFICATION SCHEDULE (GS, FRS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE		18. REMARKS	
GS		0136.01		12 (1)		3980.00		*For medical reasons, not to exceed one year. For duration of period that the individual is on sick leave; not to exceed one year 100% pay for sick leave.	
19. SIGNATURE OF REQUESTING OFFICER		DATE SIGNED		20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER		DATE SIGNED		Recorded by	
George L. Lawson		2/25/64		George L. Clement		2/25/64		CSTD RPM	
21. SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE	23. INTEGEE CODE	24. HOURS CODE	25. DATE OF BIRTH CODE	26. DATE OF GRADE CODE	27. DATE OF LEI CODE	
13	15	44447	SAS	75013	1	1961-07-19	1963-02-22	1963-02-22	
28. RETIREES	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA	32. CORRECTION CANCELLATION DATA					
MO DA YR.		1-CEC 3-FEB 5-BOD	CODE	TYPE	MO DA YR	EOD DATA	33. SECURITY REG. NO.	34. SEL	
35. VET PREFERENCE	36. SERV. COMP. DATE	37. LONG COMP. DATE	38. CAREER CATEGORY	39. FED. HEALTH INSURANCE	40. SOCIAL SECURITY NO.				
CODE	MO DA YR	MO DA YR	CAR REG. PROV. TEMP. CODE	CODE	CODE				
1-B-BOD 1-5-PT 7-10-PT	1 06	1 15	1	1	0-00100 1-001				
41. PREVIOUS GOVERNMENT SERVICE DATA	42. LEAVE CAT.	43. FEDERAL TAX DATA	44. STATE TAX DATA						
CODE	CODE	NOV EXECUTED CODE	NO TAX EXEMPTIONS	NOV EXECUTED	CODE	NO TAX EXEMPT STATE CODE			
0-NO PREVIOUS SERVICE 1-NO BRIEF IN SERVICE 2-BRIEF IN SERVICE (LESS THAN 3 YEARS) 3-BRIEF IN SERVICE (MORE THAN 3 YEARS)	1-YES 2-NO	C	C	1-YES 2-NO					
45. POSITION CONTROL CERTIFICATION	46. O.P. APPROVAL	47. APPROVAL	48. DATE APPROVED						
2/25/64	2/25/64	George L. Clement	2/25/64						

*FM 1152 USE PREVIOUS EDITION

SECRET

GROUP 1
EXEMPT FROM AUTOMATIC DOWNGRADING
AND DECLASSIFICATION

SECRET

(B) (1) (b) (5) (d) (6) (E) (1) (F)

DATE PREPARED

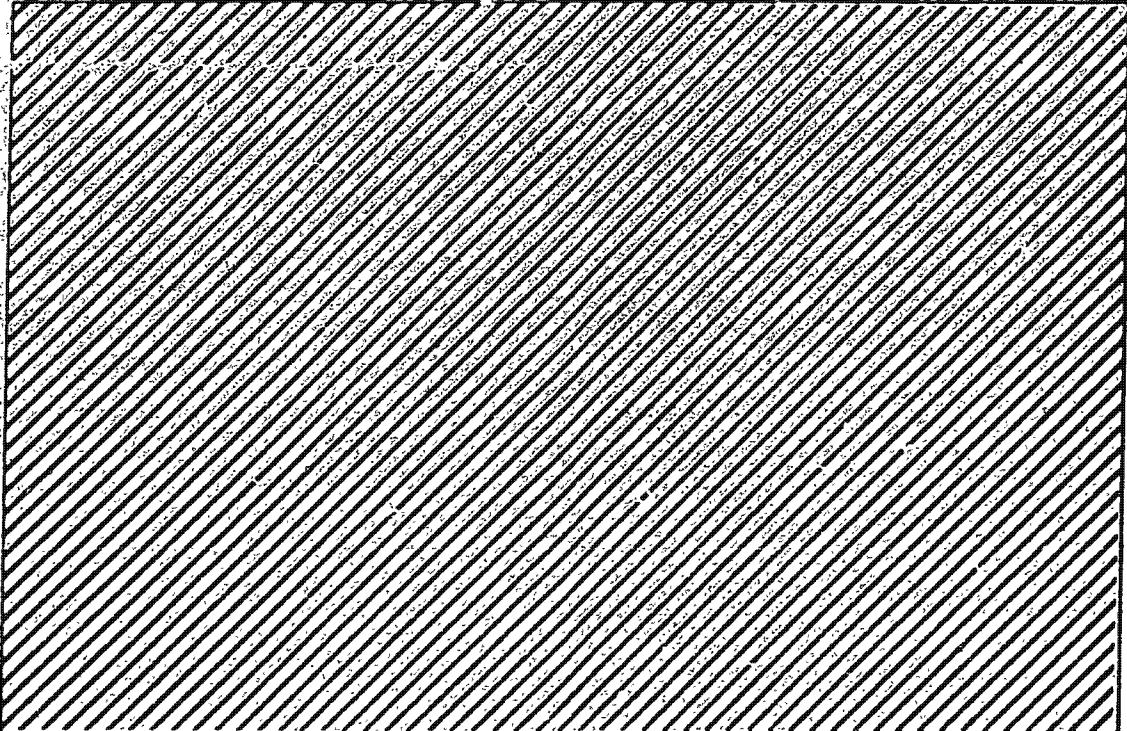
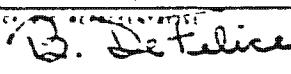
04/01/1964

REQUEST FOR PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (Last, First, Middle)		3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE REQUESTED		5. CATEGORY OF EMPLOYMENT					
02/63		[REDACTED]		Promotion		MONTH DAY YEAR APR 01 1964		PRACTIC					
6. FUNDS		7. V. TO V		8. V. TO O		9. COST CENTER NO. CHARGEABLE		10. LEGAL AUTHORITY (Completed by Office of Personnel)					
		V. TO V		V. TO O		4132-2001-1000							
11. ORGANIZATIONAL DESIGNATION		12. POSITION TITLE		13. CAREER SERVICE DESIGNATION		14. CLASSIFICATION SCHEDULE (G-1, L.B. etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE	
DOD/Special Missions Staff U. S. Field Forward Operations Station - JMWAVE CI Section		OPS OFFICER		D		SS		0135.01		12 (1)		\$ 0000	
18. REMARKS													
Received 04/01/64 [Signature]													
19. SIGNATURE OF REQUESTING OFFICER				DATE SIGNED		20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER				DATE SIGNED			
[Signature]				04/01/64		[Signature]				04/01/64			
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL													
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGEE CODE	24. HOURS LOGED	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LE				
45	10	NUMBERIC ALPHABETIC				2	15-11-19	MO DA YR	MO DA YR	MO DA YR			
28. RITE EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION CANCELLATION DATA	33. SECURITY REG. RD		34. SEL				
MO DA YR			1-CSC 2-TECA 3-NONE		CODE	TYPE	MO DA YR	EOD DATA					
35. VET PREFERENCE		36. SERV COMP DATE	37. LONG COMP DATE		38. CAREER CATEGORY	39. FED. HEALTH INSURANCE	40. SOCIAL SECURITY RD						
CODE 0-NONE 1-5 PT 2-10 PT		MO DA YR	MO DA YR		CAR RSV PROV TEMP	CODE	0-REG 1-105	HEALTH INS. CODE					
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT CODE	43. FEDERAL TAX DATA		44. STATE TAX DATA						
CODE 0-NO PREVIOUS SERVICE 1-BEFORE IN SERVICE 2-BEAN IN SERVICE (DID NOT 3 YEARS) 3-BEAN IN SERVICE (DID 3 YEARS)					FORM EXECUTED 1-YES 2-NO	NO TAX EXEMPTIONS	FORM EXECUTED 1-YES 2-NO	CODE	NO TAX EXEMPT STATE CODE				
45. POSITION CONTROL CERTIFICATION													
O.P. APPROVAL													
DATE APPROVED [Signature]													

SECRET

Form Filled 1-1

		
NAME OF EMPLOYEE (Last-First-Middle)	NAME AND RELATIONSHIP OF DEPENDENT*	CLAIM NUMBER
HIDALGO, BALMES N.	6619 self	60-264
<p>There is on file in the Benefits and Counseling Branch, Benefits and Services Division, Office of Personnel, an Official Disability Claim File on the above named employee (or his dependent*) for an illness, injury, or death incurred on <u>30 May 1963</u>. Broken left foot.</p> <p>This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.</p>		
DATE OF NOTICE	SIGNATURE OF BUREAU OFFICIAL 	
NOTICE OF OFFICIAL DISABILITY CLAIM FILE		

SECRET

(When Filled In)

DATE PREPARED

18 April 1963

REQUEST FOR PERSONNEL ACTION							
1. SERIAL NUMBER	2. NAME (Last, First, Middle)		3. EFFECTIVE DATE REQUESTED				
11111111111111111111	4. CATEGORY OF EMPLOYMENT		4. DATE	5. MONTH	6. YEAR		
	P.P. (Personnel)		04	28	63		
7. SIGNATURE OF PERSONNEL ACTION	8. FUND		9. COST CENTER NO. CHARGEABLE				
EXCITED APPOINTMENT	W TO W	W TO CP	10. LOCATION OF OFFICIAL STATION				
	CP TO W	CP TO CP	11. ORGANIZATIONAL DESIGNATIONS				
	12. POSITION TITLE		13. CAREER SERVICE DESIGNATION				
	OPS OFFICER		12. POSITION NUMBER	13. CAREER SERVICE DESIGNATION			
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)	15. OCCUPATIONAL SERIES		16. GRADE AND STEP	17. SALARY OR RATE			
GS	0136.01		11 (4)	\$ 8840			
18. REMARKS							
<p>P - 359</p> <div style="border: 1px solid black; padding: 5px; display: inline-block;"> Recorded by CSPD Gm </div>							
19. SIGNATURE OF REQUESTING OFFICER			DATE SIGNED	20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER			DATE SIGNED
Louis W. Armstrong, C/SAS, PAF			18 Apr 63				11 Apr 63
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL							
21. OFFICE CAT NO	22. STATE CAT NO	23. STATE CODE	24. STATE FIPS CODE	25. STATE OF BIRTH	26. CAREER DATA	27. CAREER DATA	
13 10	61770 515 9999		2	45-27119	217 58	741 6	62
28. STATE EXPIRES	29. SPECIAL REFERENCES	30. ELEMENT CODE	31. SIGNATURE ON DATA CODE	32. CORRECT INSURANCE DATA CODE	33. SIGNATURE ON DATA CODE	34. SIGNATURE ON DATA CODE	35. SIGNATURE ON DATA CODE
06 1963		1				217 20	11
36. VET. PREFERENCES		37. FEDERAL COMP. DATA	38. CAREER CATEGORY	39. FEDERAL HEALTH INSURANCE	40. SOCIAL SECURITY NO.		
1	2	071 101 101 101 101	1	1	X		
41. PREVIOUS GOVERNMENT SERVICE DATA		42. FEDERAL TAX DATA	43. STATE TAX DATA				
1	2	3	4	5	6	7	8
45. POSITION CONTROL CERTIFICATION							
75 Kearny 4/22/63							

FORM 1152 OBSOLETE PREVIOUS EDITION
4-62 AND FORM 1152A

SECRET

GROUP 1
REFRESHMENT, AMENITY, AND
DECLASSIFICATION

641

SECRET

(Rev. 1-15-61, 1-15-62)

DATE PREPARED

16 April 1963

REQUEST FOR PERSONNEL ACTION					
1. SERIAL NUMBER	2. NAME (Last-First-Middle)				
027630	H. ALON, R. N., Jr.				
3. NATURE OF PERSONNEL ACTION DESIGNATION			4. EFFECTIVE DATE REQUESTED	5. CATEGORY OF EMPLOYMENT	
FUNDING			MONTH YEAR Apr 63	REGULAR	
6. FUNDS			7. COST CENTER NO. CHARGE NAME 3012-1000-1000	8. LEGAL AUTHORITY (Completed by Office of Personnel)	
9. ORGANIZATIONAL DESIGNATIONS DEP Special Affairs Staff FI/CI Branch			10. LOCATION OF OFFICIAL STATION Washington, D.C.		
11. POSITION TITLE OPS OFFICER			12. POSITION NUMBER 0682	13. CAREER SERVICE DESIGNATION D	
14. CLASSIFICATION SCHEDULE (GS, LS, etc.) GS		15. OCCUPATIONAL SERIES 0136.01	16. GRADE AND STEP 11 (4)	17. SALARY OR RATE 8840	
18. REMARKS					
Recorded by CSPD <i>JK</i>					
19. SIGNATURE OF REQUESTING OFFICER Louis W. Armstrong, USAF LOUIS W. ARMSTRONG, USAF					
20. SIGNATURE OF CAREER SERVICE APPROVING OFFICER <i>Walter P. Johnson, USAF</i>					
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
21. ACTION NO. EMPLOYEE CODE		22. PAY GRADE CODE	23. PAY RATE CODE	24. PAY RATE IN EFFECT CODE	25. PAY RATE CODE
45/10		22. PAY GRADE CODE	23. PAY RATE CODE	24. PAY RATE IN EFFECT CODE	25. PAY RATE CODE
26. PAY RATE CODE		27. PAY RATE CODE	28. PAY RATE CODE	29. PAY RATE CODE	30. PAY RATE CODE
31. PAY RATE CODE		32. PAY RATE CODE	33. PAY RATE CODE	34. PAY RATE CODE	35. PAY RATE CODE
36. PAY RATE CODE		37. PAY RATE CODE	38. PAY RATE CODE	39. PAY RATE CODE	40. PAY RATE CODE
41. PAY RATE CODE		42. PAY RATE CODE	43. PAY RATE CODE	44. PAY RATE CODE	45. PAY RATE CODE
46. PAY RATE CODE		47. PAY RATE CODE	48. PAY RATE CODE	49. PAY RATE CODE	50. PAY RATE CODE
51. PREVIOUS CAREER SERVICE DATA					
CODE		52. PREVIOUS CAREER SERVICE DATA	53. PREVIOUS CAREER SERVICE DATA	54. PREVIOUS CAREER SERVICE DATA	55. PREVIOUS CAREER SERVICE DATA
56. PREVIOUS CAREER SERVICE DATA		57. PREVIOUS CAREER SERVICE DATA	58. PREVIOUS CAREER SERVICE DATA	59. PREVIOUS CAREER SERVICE DATA	60. PREVIOUS CAREER SERVICE DATA
61. POSITION CONTROL CERTIFICATION <i>W. Armstrong, Jr.</i>		62. O.P. APPROVAL <i>W. Armstrong, Jr.</i>	63. DATE APPROVED Apr 16 63		

RZRI 25 APR 63

NOTIFICATION OF PERSONNEL ACTION									
OEF.									
1. SERIAL NUMBER	2. NAME (LAST FIRST MIDDLE)								
027630	MIDALGO B N JR								
3. NATURE OF PERSONNEL ACTION									
RESIGNATION									
6. FUNDS	<input checked="" type="checkbox"/>	V TO V		V TO CP		4. EFFECTIVE DATE	5. CATEGORY OF EMPLOYMENT		
						04 27 63	REGULAR		
7. COST CENTER NO. (CHARGEABLE)	8. CSC OR OTHER LEGAL AUTHORITY								
3232 1000 1000									
9. ORGANIZATIONAL DESIGNATIONS									
10. REMARKS									
11. POSITION TITLE									
OPS OFFICER									
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS		0136.01		11 4		8840			
18. SIGNATURE OR OTHER AUTHENTICATION									

SECRET

REQUEST FOR PERSONNEL ACTION

卷之三

11 December 1963

SECRET

When Potted in

SECRET

Form 1152, Filled In

REQUEST FOR PERSONNEL ACTION												DATE PREPARED	
1. SERIAL NUMBER		2. NAME (Last-First-Middle)										4. EFFECTIVE DATE REQUESTED	
027630		HIDALGO, RAMES M. JR.										MOUTH DAY YEAR	
5. NATURE OF PERSONNEL ACTION		6. FUND SOURCE										7. COST CENTER NO. CHARGEABLE	
REASSIGNMENT		X		V TO V		X		V TO CF		X		8. CATEGORY OF EMPLOYMENT	
8. FUND SOURCE		X		CP TO V		X		CP TO CF		X		REGULAR	
9. ORGANIZATIONAL DESIGNATIONS												10. LOCATION OF OFFICIAL STATION	
DDP WH SECTION A PLANS & OPERATIONS STAFF												WASHINGTON, D. C.	
11. POSITION TITLE												12. POSITION NUMBER	
OPS OFFICER												BR-641	
14. CLASSIFICATION SCHEDULE (GS, LS, RS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE							
GS		0136.01		11 3		\$6,080							
18. REMARKS													
FROM: DDP/WH/L/FT-CI/1681													
18A. SIGNATURE OF REQUESTING OFFICIAL				DATE SIGNED		18B. SIGNATURE OF CAREER SERVICE APPROVING OFFICER				DATE SIGNED			
<i>Personnel</i>						<i>Reed</i>							
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL													
19. ACTION CODE		20. EMPLOY. CODE		21. OFFIC. CODE		22. STATION CODE		23. UNIT/ORG. CODE		24. SPLIT DATE 1 (M-D-Y)		25. SPLIT DATE 2 (M-D-Y)	
22		C		2024		C		1		05 27 19		06 01 19	
26. DATE EXPIRES		27. SPECIAL REFERENCE		28. RET. RECDNG. DATA		29. SEPARATE EXECUTIVE/TECHNICAL/AD. DATA		30. MIL. SERV. DATA		31. FEALY / HEALTH INSURANCE		32. SECURITY REG. NO.	
MO. DD. YY.		1 - 252 2 - 4128 3 - 6784		CODE		DATA CODE		CODE		CODE		33. SER. NO.	
35. VET. PREFERENCE		36. SERV. COMP. DATE		37. LONG. COMP. DATE		38. MIL. SERV. DATA		39. FEALY / HEALTH INSURANCE		40. SOCIA. SECURITY NO.			
CODE		0 - NO 1 - 5 PT 2 - 10 PT		MO. DD. YY.		MO. DD. YY.		CODE		CODE			
41. PREVIOUS GOVERNMENT SERVICE DATA						42. PREV. CAT. CODE		43. PREV. TAX DATA		44. STATE TAX DATA			
CODE						CODE		FROM PREVIOUS 1 - YES 2 - NO		TO PREVIOUS 1 - YES 2 - NO		CODE	
45. POSITION CONTROL CERTIFICATION						46. O.P. APPROVAL		47. DATE APPROVED					
<i>1/16/62 J.M.</i>						<i>Reed</i>							

SECRET

(When Filled In)

DATE PREPARED

8 August 1961

REQUEST FOR PERSONNEL ACTION					
1. SERIAL NUMBER	2. NAME (Last-First-Middle)				
027630	HIDALGO, B. N. Jr.				
3. NATURE OF PERSONNEL ACTION REASSIGNMENT (And Transfer to Vouchered Funds)				4. EFFECTIVE DATE REQUESTED	5. CATEGORY OF EMPLOYMENT
				MONTH DAY YEAR 19 61	REGULAR
6. FUNDS		V TO V	V TO CP	7. COST CENTER NO. CHARGEABLE	8. OFFICIAL AUTHORITY (Completed by Office of Personnel)
		X	X	2635-5000-8021	
9. ORGANIZATIONAL DESIGNATIONS DDP/WH INFO Branch 4 PI-CI Sec.				10. LOCATION OF OFFICIAL STATION Washington, D.C.	
11. POSITION TITLE OPS OFFICER (E)				12. POSITION NUMBER 0681	13. PCB CONTROL NO. 14. CAREER SERVICE DESIGNATION D
15. CLASSIFICATION SCHEDULE (E.G. LN/ SEC.)		16. OCCUPATIONAL SERIES CS (12)		17. GRADE AND STEP 0136.01	18. SALARY OR RATE \$ 8,030
19. REMARKS From: DDP/WH, Br. 4, #0626					
20. SIGNATURE OF CHIEF SERVICE APPROVING OFFICER Hop Paro.				21. SIGNATURE OF CHIEF SERVICE APPROVING OFFICER Reedy	
22. SIGNATURE FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL					
23. PREVIOUS EMPLOYMENT DATA		24. STATE IN WHICH EMPLOYED	25. STATE OF BIRTH	26. STATE OF RESIDENCE	27. STATE OF LAST
16	10 64152	11 75013	1	05 2719	1
28. DATE OF RE-ASSIGNMENT		29. DATE OF RE-ASSIGNMENT	30. DATE OF RE-ASSIGNMENT	31. SECURITY REG. NO.	32. SECURITY REG. NO.
MO. DAY. YR.	MO. DAY. YR.	MO. DAY. YR.	MO. DAY. YR.	MO. DAY. YR.	MO. DAY. YR.
33. PAY AND COMPENSATION DATA		34. PAY AND COMPENSATION DATA	35. PAY AND COMPENSATION DATA	36. PAY AND COMPENSATION DATA	37. PAY AND COMPENSATION DATA
CODE	MO. DAY. YR.	MO. DAY. YR.	MO. DAY. YR.	MO. DAY. YR.	MO. DAY. YR.
38. PAY AND COMPENSATION DATA		39. PAY AND COMPENSATION DATA	40. PAY AND COMPENSATION DATA	41. PAY AND COMPENSATION DATA	42. PAY AND COMPENSATION DATA
CODE	MO. DAY. YR.	MO. DAY. YR.	MO. DAY. YR.	MO. DAY. YR.	MO. DAY. YR.
43. POSITION CONTROL CERTIFICATION		44. O.P. APPROVAL			
7/7 Kearney 08/1/61		Reedy			

SECRET

REQUEST FOR PERSONNEL ACTION

1. Serial No.	2. Name (Last-First-Middle)	3. Date Of Birth	4. Vot. Prefer.	5. Ser.	6. C. - FOU
7. SCD	HIDALGO, BALLES M. JR.	Mo. Da. Yr.	Normal Code S Pl. 1	Mo. Da. Yr.	Mo. Da. Yr.
Mo. Da. Yr.	8. CSC Rec'd.	9. CSC Or Other Legal Authority	10. Aprnt. Affidav.	11. FEGLI	12. LCD
Mo. Da. Yr.	Yes - 1 Code No - 2		Mo. Da. Yr.	Yes - 1 Code No - 2	Mo. Da. Yr.
				Yes - 1 Code No - 2	

2

PREVIOUS ASSIGNMENT

14. Organizational Designations DDI/OTR OPERATIONS SCHOOL COVERT TRAINING	Code	15. Location Of Official Station WASH., D. C.	Station Code		
16. Dept. - Field Dept : Code USMld : Frqn : INSTRUCTOR OPERATIONS	17. Position Title	18. Position No. 1014	19. Ser. 20. Occup. Series GS 1711.50		
21. Grade & Step 11 2	22. Salary Or Rate \$ 7270	23. SD D	24. Date Of Grade Mo. Da. Yr. 03/17/64	25. PSI Due Mo. Da. Yr. 13/17/64	26. Appropriation Number 0125-2533

ACTION

27. Nature Of Action REASSIGNMENT	Code	28. EH. Date Mo. Da. Yr. 06/26/60	29. Type Of Employee REGULAR	Code	30. Separation Date 7/1
--------------------------------------	------	---	---------------------------------	------	----------------------------

3A

PRESENT ASSIGNMENT

31. Organizational Designations DDP WH BRANCH 4	Code	32. Location Of Official Station WASH., D. C.	Station Code		
33. Dept. - Field Dept : Code USMld : Frqn : OPS OFFICER	34. Position Title	35. Position No. BA-626	36. Ser. 37. Occup. Series GS 0136.01		
38. Grade & Step 11 2	39. Salary Or Rate \$ 7270	40. SD D	41. Date Of Grade Mo. Da. Yr. 1/21/64	42. PSI Due Mo. Da. Yr. 1/21/64	43. Appropriation Number 0135 1000 1000

SOURCE OF REQUEST

A. Title W/PERSONNEL OFFICER	B. For Additional Information Call (Name & Telephone Ex.) X6242	C. Request Approved By (Signature And Title) 17 Jan 60			
CLEARANCES					
Clearance A. Career Board	Signature L. K. Kelly	Date 6-21-60	Clearance D. Placement	Signature	Date
B. Pos. Control	L. K.	6-23-60	E.		
C. Classification			F. Approved By	W. L. L. L.	6-23-60
Remarks 2 copies to Security. 1 Loss Notice.					

SECRET

SECRET

(When Filled In)

DATE PREPARED			REQUEST FOR PERSONNEL ACTION						V-16 V			V-16 UV		
Mo	Do	Yr	2. Name (Last-First-Middle)			3. Date of Birth			4. Ver. Prof.	5. Sex	6. CS - EOD			
5	20	59	HIDALGO, Palma N. Jr.			Mo	Do	Yr	None-0	Code	Mo	Do	Yr	
7. SCD			8. CSC Ref no.			9. CSC Or Other Legal Authority			10. Appnt. Affidav.	11. FEGL	12. LCD	13. MIL SERV CREDITS LCD		
Mo	Do	Yr	Yes - 1	Code	No - 2	Mo	Do	Yr	Yes - 1	Code	No - 2	Mo	Do	Yr

PREVIOUS ASSIGNMENT

14. Organizational Designations			Code	15. Location Of Official Station			Station Code
DDP/WH Branch III Central America Section				Washington, D. C.			
16. Dept.-Field	17. Position Title			18. Position No.	19. Serv.	20. Occup. Series	
Dept. D Usfld: Frgn - D	Area Ops Officer			0486	GS	0136.01	
21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade	25. PSI Due	26. Appropriation Number		
11 1	\$ 7,030	D	03/17/58	09/20/59	8-3500-20		

ACTION

27. Nature Of Action			Code	28. Eff. Date	29. Type Of Employee	Code	30. Separation Date
Reassignment + Transfer to Confidential Grade			09	06/16/59	Regular	01	

PRESENT ASSIGNMENT

31. Organizational Designations			Code	32. Location Of Official Station			Station Code
DDS/OTR Operations School Covert Training			1172	Washington, D. C.			7500-3
33. Dept.-Field	34. Position Title			35. Position No.	36. Serv.	37. Occup. Series	
Dept. D Usfld: D Frgn - 3	Instructor Operations			1014	GS	1711.50	
38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade	42. PSI Due	43. Appropriation Number		
11 1	\$ 7,030	D			9-7500-30-018		

SOURCE OF REQUEST

A. Requested By (Name And Title)	C. Request Approved By (Signature And Title)		
C/OS	Director of Training		
B. For Additional Information Call (Name & Telephone Ext.)			
X-3078			

CLEARANCES

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board			D. Placement		
B. Pos. Control	CP	11 JUN 59	E.		
C. Classification			F. Approved By	C. Powell	11 JUN 59

Remarks

One copy forwarded to UNVoucherED Payroll. Two copies forwarded to Security.

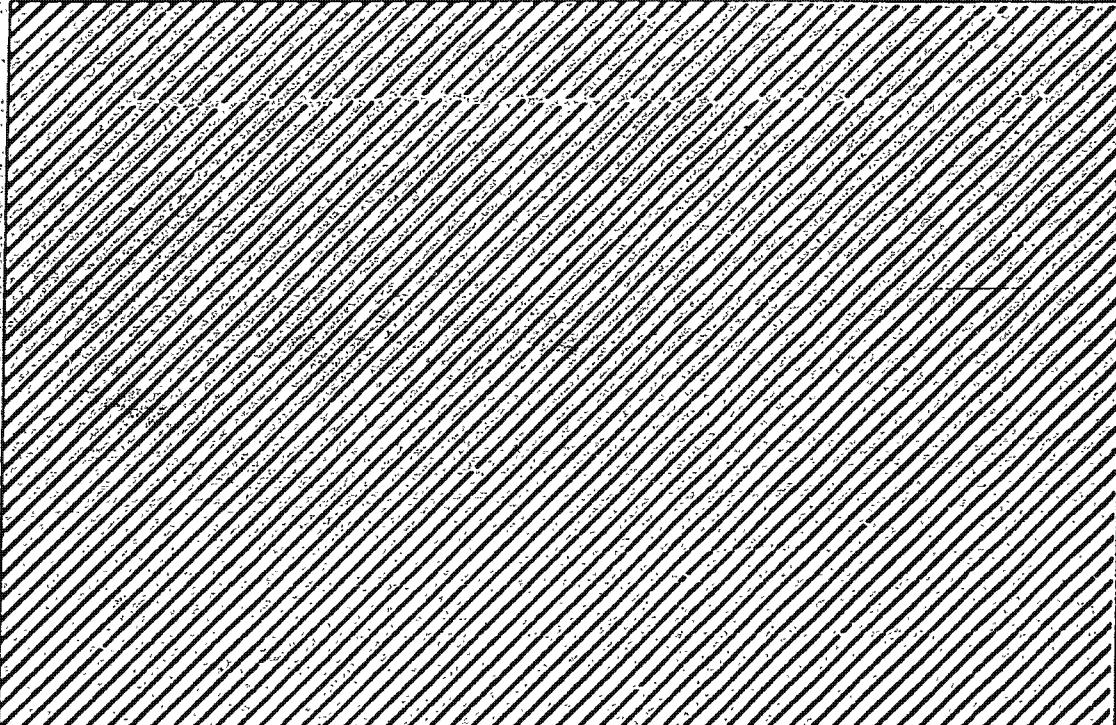
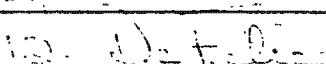
FORM 1152a (USE PREVIOUS EDITION)
12-57Recorded by
CSPD

SECRET

Security Approval Date 11 JUN 59
Pars. SD/CS 11 JUN 59
11 JUN 59

SECRET

REF ID: A65157

		
NAME OF EMPLOYEE (LAST-FIRST-MIDDLE)	DATE OF BIRTH	CASE OR CLAIM NUMBER
HEDALCO, Ealmes	Unk	58-112
<p>There is on file in the Casualty Affairs Branch, Benefits and Casualty Division, Office of Personnel, an Official Disability Claim File on the above named employee for an illness, injury, or death incurred on <u>1 Oct 57</u>.</p> <p>This notice should be filed in the employee's Official Personnel Folder as a permanent cross-reference to the Official Disability Claim File.</p>		
DATE OF NOTICE	SIGNATURE OF BCO REPRESENTATIVE	
24 Sept 58		
NOTICE OF OFFICIAL DISABILITY CLAIM FILE		

SECRET

Classification According
TO Content6-1766
REQUEST FOR PERSONNEL ACTION

3/14/58

1. Serial No.	2. Name (Last, First, Middle)	3. Date Of Birth	4. Vet. Prof.	5. Sex	6. CS. EOD
12707	MR. BALMIS N. HIDALGO, Jr.	Mo 5 Da 27 Yr 19	No. 0 Code 5 P-1	1	Mo 2 Da 17 Yr 51
7. SCD	8. CSC Rec'd	9. CSC Or Other Legal Authority	10. Appt. Affidav.	11. FEGL	12. LCD
Mo 7 Da 16 Yr 46	Yes - 1 Code No - 2	150419431	Mo 3 Da 13 Yr 56	Yes - 1 Code No - 2	Mo 1 Da 2 Yr 21

PREVIOUS ASSIGNMENT

14. Organizational Designations	Code	15. Location Of Official Station	Station Code		
16. Dept., Field	17. Position Title	18. Position No.	19. Serv.	20. Occup. Series	
Dept - 1 Code					
Usfld -					
Fran -					
21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade	25. PSI Due	26. Appropriation Number
	\$		Mo 3 Da 17 Yr 56	Mo 9 Da 26 Yr 57	

ACTION

27. Nature Of Action	Code	28. Eff. Date	29. Type Of Employee	Code	30. Separation Date
Excepted Appointment	13	Mo 3 Da 17 Yr 56	Regular	01	

PRESENT ASSIGNMENT

31. Organizational Designations	Code	32. Location Of Official Station	Station Code		
DDP/WH Branch III Central America Section	4613	Washington, D.C.			
33. Dept., Field	34. Position Title	35. Position No.	36. Serv.	37. Occup. Series	
Dept - X Code	Area Ops Officer	# BA-466-11	GS	0136.01	
Usfld -					
Fran -					
38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade	42. PSI Due	43. Appropriation Number
11-3	\$ 6390	D	Mo 3 Da 17 Yr 56	Mo 9 Da 26 Yr 57	8-3500-20

SOURCE OF REQUEST

A. Requested By (Name And Title)	C. Request Approved By (Signature And Title)
WU Personnel Officer	
B. For Additional Information Call (Name & Telephone Ext)	
X 8242	

CLEARANCES

Clearance	Signature	Date	Clearance	Signature	Date
A. Career Board		3/12/58	D. Placement		3/14/58
B. Pos. Control		3/11/58	E.		
C. Classification			F. Approved By	Robert E. Sheay	10 APR 1958

Remarks

Subject is presently engaged as a Contract Employee with the WH Division.
* For slotting purposes Only.

Approved for DOD property
K. Johnson
SSA 100

<small>STANDARD FORM 50 15 SEP 60 GSA GEN. REG. GEN. SER. GEN. SER. GEN. SER. GEN. SER. GENERAL REGULATIONS FOR PERSONNEL GENERAL REGULATIONS FOR PERSONNEL GENERAL REGULATIONS FOR PERSONNEL GENERAL REGULATIONS FOR PERSONNEL</small>																					
UNVOUCHERED																					
REQUEST FOR PERSONNEL ACTION																					
REQUESTING OFFICE: Fill in items 1 through 12 and A through D except 6B and 7 unless otherwise instructed. If applicable, obtain resignation and fill in separation data on reverse.																					
1. NAME (Mr. - Miss - Mrs. - One given name, initial(s), and surname) Mr. Balme N. HIDALGO, Jr.		2. DATE OF BIRTH 27 May 1919	3. REQUEST NO. 8 July 55																		
4. NATURE OF ACTION REQUESTED: A. PERSONNEL (Specify whether appointment; promotion, separation, etc.) Excepted Appointment		5. EFFECTIVE DATE A. PROPOSED: 6. APPROVED:	7. C.S. OR OTHER LEGAL AUTHORITY																		
8. POSITION (Specify whether civilian, change grade or title, etc.) 9. FIELD <input type="checkbox"/> DEPARTMENTAL		10. POSITION TITLE AND NUMBER 11. SERVICE GRADE AND SALARY 12. ORGANIZATIONAL DESIGNATION 13. HEADQUARTERS 14. FIELD OR DEPARTMENTAL <input checked="" type="checkbox"/> FIELD <input type="checkbox"/> DEPARTMENTAL	1. O. (FI) BAF-277 GS-0136.51-11, \$6390.00 p.a. K DDP/WH																		
A. REMARKS (Use reverse if necessary) <p>Subject is presently a contract employee with Project HYPOTHESIS.</p>																					
B. REQUESTED BY (Name and title) John J. Hidalgo Jr. C/NH		C. REQUEST APPROVED BY Signature: Title:																			
D. FOR ADDITIONAL INFORMATION (Name and telephone extension) 13692																					
15. VETERAN PREFERENCE <table border="1"> <tr> <td>NAME</td> <td>WWII</td> <td>OTHER</td> <td>5 PT</td> <td>13 POINT</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td>DISAB. OTHER</td> </tr> </table>		NAME	WWII	OTHER	5 PT	13 POINT					DISAB. OTHER	16. POSITION CLASSIFICATION ACTION <table border="1"> <tr> <td>NEW</td> <td>VICE</td> <td>I.A.</td> <td>REAL</td> </tr> <tr> <td>*</td> <td></td> <td></td> <td></td> </tr> </table>		NEW	VICE	I.A.	REAL	*			
NAME	WWII	OTHER	5 PT	13 POINT																	
				DISAB. OTHER																	
NEW	VICE	I.A.	REAL																		
*																					
17. APPROPRIATION FROM: M W TO: 6-3525-56-051		18. SUBJECT TO C. S. RETIREMENT ACT (YES-NO) YES																			
		19. DATE OF APPOINT- MENT AFFIDAVITS (ACCESSIONS ONLY) STATE:																			
20. LEGAL RESIDENCE <input type="checkbox"/> CLAIMED <input type="checkbox"/> PROVED																					
21. STANDARD FORM 50 REMARKS																					
22. CLEARANCES INITIAL OR SIGNATURE DATE REMARKS: A. <i>Ch - 8 Aug 55</i> B. CEIL. OR POS. CONTROL C. CLASSIFICATION D. PLACEMENT OR EMPL. <i>7-20</i> E. F. APPROVED BY <i>7/28/55</i>																					

SECRET

(Form 1516-10)

1. PERSONAL ID		BIOGRAPHIC PROFILE (PART I) (CD) 16 Jul 1976																																																																										
2. NAME (Last-First-Middle) HIMMEL, B. N., Jr.		3. SEX	4. DATE OF BIRTH	5. LONGEVITY COM. DATA																																																																								
6. MARITAL STATUS Married		7. YEAR OF BIRTH 2 1914 1992	8. US NATURALIZATION DATA	9. Puerto Rico NA																																																																								
10. CAREER STATUS STAFF ALIVE		11. OTHER STATUS	12. LAST MED. REC Jul 1967	13. DUAL POS Duty Only																																																																								
14. EDUCATION ACHIEVE STATUS X		15. GRADE	16. ACTIVE CIA BIRTH CIA CAT-1	17. RELEASED MIL. SER. CAT-1																																																																								
18. ASSESSMENT DATA None		19. PROFESSIONAL TEST DATA Feb 1958	20. LANGUAGE PROFICIENCY TEST DATA None																																																																									
<p>1943-45 Military Service, US Army, Cpl - Infantry</p> <p>1945-47 Jersey City Quartermaster Depot, Jersey City, NJ - Inspector</p> <p>1948-49 Francis H. Ladd Co (Food Wholesaler), NYC - Correspondence Clerk</p> <p>1948-50 Dept of Justice, FBI, NYC - Contract Agent on a Penetration Project</p> <p>1950-51 Colonial Trust Co (Bank), NYC - Collections Clerk</p> <p>1951-52 American Trust Co (Bank), NYC - Collections Clerk</p> <p>1952-53 Dept of Defense, New York QM Procurement Agency, NYC - Inspector</p>																																																																												
<p>21. NON-CIA EDUCATION High School Graduate</p> <p>1945-46 New York University - Foreign Trade, Business Law</p>																																																																												
22. FOREIGN LANGUAGE ABILITIES (Language, Proficiency, Date Tested)		Portuguese - R Inform; W, P, S, U None (Oct 1959); T None - May 1958 Spanish - R High; W Inform; P, S, U Native (Nov 1959); Translate, Interpret - May 1958																																																																										
<p>23. AGENCY SPONSORED TRAINING</p> <table> <tr> <td>1958 Comm Party Org & Ops</td> <td>1958 Int'l Orient</td> </tr> <tr> <td>1958 CI Famil</td> <td>1959 Picks & Locks</td> </tr> <tr> <td>1958 Info Rptng, Rpts & Rpts</td> <td>1959 Audio Surveil Mgmt</td> </tr> <tr> <td>1958 Operations</td> <td>1966 Undetermined Entry (Int'l)</td> </tr> </table>					1958 Comm Party Org & Ops	1958 Int'l Orient	1958 CI Famil	1959 Picks & Locks	1958 Info Rptng, Rpts & Rpts	1959 Audio Surveil Mgmt	1958 Operations	1966 Undetermined Entry (Int'l)																																																																
1958 Comm Party Org & Ops	1958 Int'l Orient																																																																											
1958 CI Famil	1959 Picks & Locks																																																																											
1958 Info Rptng, Rpts & Rpts	1959 Audio Surveil Mgmt																																																																											
1958 Operations	1966 Undetermined Entry (Int'l)																																																																											
<p>24. CIA EMPLOYMENT HISTORY SINCE 10 SEPT 1947 (Personnel Actions, Military Orders, and Personnel Details)</p> <table border="1"> <thead> <tr> <th>EFFECTIVE DATE</th> <th>POSITION TITLE & OCCUPATIONAL CODE</th> <th>GRADE</th> <th>ED</th> <th>ORGANIZATION & COUNTRY, TITLE (if any)</th> <th>LOCATION</th> </tr> </thead> <tbody> <tr> <td>Mar 1958</td> <td>Feb 1952 - Mar 1958, Contract Employee for DDP/WI/Project HYDROGENES Area Ops Off 0136.01</td> <td>11</td> <td>D</td> <td>DDP/WI-III/Control Americas</td> <td>Hq</td> </tr> <tr> <td>Jun 1959</td> <td>Jan - Feb 1959, TDY Instructor (Ops) 1711.50</td> <td>11</td> <td>D</td> <td>OTR/Ops School/Covered Trng</td> <td>Hq</td> </tr> <tr> <td>Jun 1960</td> <td>Ops Off 0136.01</td> <td>11</td> <td>D</td> <td>DDP/WI-4</td> <td>"</td> </tr> <tr> <td>Aug 1961</td> <td>" "</td> <td>11</td> <td>D</td> <td>DDP/WI-4/II-CI Sec</td> <td>"</td> </tr> <tr> <td>Jan 1962</td> <td>" "</td> <td>11</td> <td>D</td> <td>DDP/WI-4/Plans & Ops Sec/Sec & Ops</td> <td>"</td> </tr> <tr> <td>Apr 1963</td> <td>" "</td> <td>11</td> <td>D</td> <td>DDP/SAS/US Fld/Forward, Ops Sec</td> <td>DDP/US</td> </tr> <tr> <td>Dec 1963</td> <td>" "</td> <td>12</td> <td>D</td> <td>DDP/SAS/CS/CS Dev Corp</td> <td>"</td> </tr> <tr> <td>Apr 1964</td> <td>" "</td> <td>12</td> <td>D</td> <td>DDP/SAS/CI Staff/Ops</td> <td>Hq</td> </tr> <tr> <td>Nov 1964</td> <td>" "</td> <td>12</td> <td>D</td> <td>DDP/SAS/CI Staff/Ops</td> <td>"</td> </tr> <tr> <td>May 1965</td> <td>" "</td> <td>12</td> <td>D</td> <td>DDP/WI/C/3rd Ops Dr</td> <td>"</td> </tr> <tr> <td>Dec 1965</td> <td>" "</td> <td>12</td> <td>D</td> <td>DDP/WI-2/</td> <td>"</td> </tr> </tbody> </table>					EFFECTIVE DATE	POSITION TITLE & OCCUPATIONAL CODE	GRADE	ED	ORGANIZATION & COUNTRY, TITLE (if any)	LOCATION	Mar 1958	Feb 1952 - Mar 1958, Contract Employee for DDP/WI/Project HYDROGENES Area Ops Off 0136.01	11	D	DDP/WI-III/Control Americas	Hq	Jun 1959	Jan - Feb 1959, TDY Instructor (Ops) 1711.50	11	D	OTR/Ops School/Covered Trng	Hq	Jun 1960	Ops Off 0136.01	11	D	DDP/WI-4	"	Aug 1961	" "	11	D	DDP/WI-4/II-CI Sec	"	Jan 1962	" "	11	D	DDP/WI-4/Plans & Ops Sec/Sec & Ops	"	Apr 1963	" "	11	D	DDP/SAS/US Fld/Forward, Ops Sec	DDP/US	Dec 1963	" "	12	D	DDP/SAS/CS/CS Dev Corp	"	Apr 1964	" "	12	D	DDP/SAS/CI Staff/Ops	Hq	Nov 1964	" "	12	D	DDP/SAS/CI Staff/Ops	"	May 1965	" "	12	D	DDP/WI/C/3rd Ops Dr	"	Dec 1965	" "	12	D	DDP/WI-2/	"
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25. DATE REVIEWED 22 Jun 1976		26. PROFILE REVIEWED BY John / J.W.		27. ITEMS 1-10 REVIEWED & VERIFIED BY EMPLOYEE John / J.W.																																																																								
28. FORM 1200 (PART I) USE PREVIOUS EDITIONS 08-57																																																																												

SECRET

PROFILE

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SECRET

(When Filled In)

PERF. SERIAL NO. 027430	BIOGRAPHIC PROFILE (PART 2)	
NAME: (Last-First-Middle) MURKIN, R. N., Jr.		DATE OF BIRTH 27 May 1919
23. SUMMARIES OF EVALUATIVE REPORTS FOR THE PAST TWO YEARS		
		
24. SUMMARY OF CAREER PREFERENCE OUTLINE AND/OR FIELD REASSIGNMENT QUESTIONNAIRE		
25. IDENTITY OF OTHER DOCUMENTS WHICH SHOULD BE REVIEWED IN DETAIL		
26. ADDITIONAL INFORMATION Appreciation 1948 from TSD/AP/CAS for the postal intercept exemplars which are invaluable to that office.		
27. DATE REVIEWED 23 Jun 1969	28. PROFILE REVIEWED BY bms/ots	

FORM NO. 1200 (PART 2) REPLACES FORM 1020 (PART 2) SECRET
1 FEB 57 WHICH IS OBSOLETE.

PROFILE

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SECRET

(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER
GENERAL					027630
SECTION A					
1. NAME (Last) Hidalgo	(First) Balmes	(Middle) N.	3. DATE OF BIRTH 05/27/19	5. SEX M	6. GRADE GS-12
7. OFFICIAL POSITION TITLE Ops Officer		8. OFF/ON DATE OF ASSIGNMENT DDP/AB/2			9. CURRENT STATION HQS
10. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY		11. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> ANNUAL <input type="checkbox"/> SPECIAL (Specify) SPECIAL (Specify)			12. REASSIGNMENT SUPERVISION REASSIGNMENT EMPLOYEE
13. DATE REPORT DUE IN O.P. 31 January 1969		14. REPORTING PERIOD (From To) 1 January 1968 - 31 December 1968			
SECTION B PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment, or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
<p>List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).</p>					
SPECIFIC DUTY NO. 1 Desk Case Officer for FI operations. Prepares cables and dispatches to and other Stations and internal Headquarters correspondence.					RATING LETTER P
SPECIFIC DUTY NO. 2 Conducts required coordination with other offices within the agency.					RATING LETTER P
SPECIFIC DUTY NO. 3 Supervises and/or maintains files and regulates indexing relating to his cases.					RATING LETTER P
SPECIFIC DUTY NO. 4					RATING LETTER P
SPECIFIC DUTY NO. 5					RATING LETTER P
SPECIFIC DUTY NO. 6					RATING LETTER P
OVERALL PERFORMANCE IN CURRENT POSITION					
<p>Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance, during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.</p>					RATING LETTER P

SECRET

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B. Provide basis for determining future personnel action. Mention of performance of managerial or supervisory duties and cost consciousness in the use of personnel, space, equipment and funds must be commented on if applicable. If extra space is needed to complete Section C, attach a separate sheet of paper.

Mr. Hidalgo is a man of unusual background even in our unusual organization. This background undoubtedly affords him qualifications for our work, but nevertheless, on the professional level he suffers from disadvantages as well--overcoming some but not others. He is not well-educated in a formal sense, and in our world of words is not adequately equipped to prepare finished written correspondence. He has difficulty in organizing his work systematically, thus at times, giving an impression that the preparation has not been thorough--which might not really have been true.

On the other hand, Mr. Hidalgo has the advantage of native fluency in Spanish and an obvious understanding of the Latin thinking process and culture. He is broadly experienced in operations, not only as a case officer but as an actual agent himself, having served four years as a Bureau penetration of the CPUSA. He is operationally imaginative and unquestionably possesses the ingenuity and courage to translate ideas into action. In this respect, however, his efforts must be channeled and selectivity exercised. On the [redacted] Desk this officer provides the valuable service of operational history and continuity; he served six years [redacted] and has been on the desk for three.

Continued

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE	SIGNATURE OF EMPLOYEE
9 Jan 1969	[Signature]

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION
4	[Signature]

DATE	OFFICIAL TITLE OF SUPERVISOR	ATURE
9 January 1969	C/WII/2/P	[Signature]

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Mr. Hidalgo is an experienced and well qualified operations officer, and it is indeed unfortunate that there are medical problems which do not allow him to be assigned overseas. Since Mr. Hidalgo cannot be assigned overseas, I too endorse his desire to be assigned to OTR or to another assignment of his choice.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPE OR PRINTED NAME AND SIGNATURE
9 JAN 1969	C/WII/2	Edwin M. Terrell [Signature]

SECRET

~~SECRET~~**SECTION C Continued****Hidalgo, Balmes N.**

Mr. Hidalgo is a gregarious uncomplicated person, generally pleasant, and generous in his instincts--but not entirely without his quixotic side--and one whose natural Latin emotionality has been intensified by a life of experiences outside the norm, e.g. years as a CP penetration, air crashes, war wounds, etc.

This officer is aware that his intellectual background and medical debilities are obstructions to his advance. Understandably, he has developed outside interests, apparently as compensation. Expectedly, his attitudes at times so reflect.

In sum, Mr. Hidalgo serves a satisfactory function on the [redacted] Desk and no doubt could continue to perform so indefinitely, but in view of his limitations in a desk-bound situation and the medical restrictions, both of which will continue to inhibit his advance in his present component, this supervisor endorses Mr. Hidalgo's desire to be considered for transfer to another component, namely OTR (specifically covert training), where his attributes would likely come more directly into play. He has the operational experience, competency in a foreign language, an outgoing personality, and experience in lecturing and teaching.* Finally, regardless of the shortcomings reflected in this evaluation, the grading officer finds much to admire in Mr. Hidalgo personally.

*Should a suitable opening in that field be unavailable, it is felt there would be merit also in considering Mr. Hidalgo's other stated interests, i.e., the technical interrogation section of the Office of Security or OO Contacts Division.

~~SECRET~~

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER		
SECTION A				GENERAL		
1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH		3. SEX	4. GRADE	5. SD	
HIDALGO, Balme N., Jr.	27 May 1919		M	GS-12	D	
6. OFFICIAL POSITION TITLE	7. OFF/ DIV/ BN OF ASSIGNMENT		8. CURRENT STATION			
Ops Officer	DDP/WH/2		Headquarters			
9. CHECK (X) TYPE OF APPOINTMENT	10. CHECK (X) TYPE OF REPORT					
<input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY	<input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL		<input type="checkbox"/> REASSIGNMENT SUPERVISOR <input checked="" type="checkbox"/> REASSIGNMENT EMPLOYEE			
CAREER-PROVISIONAL (See Instructions - Section C)		SPECIAL (Specify)		SPECIAL (Specify)		
11. DATE REPORT DUE IN O.P.	12. REPORTING PERIOD (From To)		1-31-1967 to 07-01-1967 12-66			
SECTION B PERFORMANCE EVALUATION						
W - Weak	Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment, or to separation. Describe action taken or proposed in Section C.					
A - Adequate	Performance meets all requirements. It is entirely satisfactory, and is characterized neither by deficiency nor excellence.					
P - Proficient	Performance is more than satisfactory. Desired results are being produced in a proficient manner.					
S - Strong	Performance is characterized by exceptional proficiency.					
O - Outstanding	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.					
SPECIFIC DUTIES						
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).						
SPECIFIC DUTY NO. 1	Responsible for all FI/CI Projects for the Desk					RATING LETTER
						S
SPECIFIC DUTY NO. 2	Initiates, prepares and coordinates all operational communications to the field on FI/CI matters					RATING LETTER
						P
SPECIFIC DUTY NO. 3	Prepares project renewals, studies and papers on FI/CI matters					RATING LETTER
						P
SPECIFIC DUTY NO. 4	Translates Spanish language material for the Branch					RATING LETTER
						O
SPECIFIC DUTY NO. 5	Coordinates FI/CI matters for the Desk with other Hqs components					RATING LETTER
						S
SPECIFIC DUTY NO. 6	Occasionally handles visiting indigenous assets					RATING LETTER
						S
31 MAR 1967 OVERALL PERFORMANCE IN CURRENT POSITION						RATING LETTER
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.						S

SECRET

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Monitor of performance of managerial or supervisory duties must be described, if appropriate.

Comment by Mr. Tsikerdanos, previous supervisor: 151 F11 '67

Mr. Hidalgo is a very capable case officer who is more suited to a field position. He is adept at handling indigenous personnel and has a keen operational mind. He is good at grasping operational leads but is not a capable writer. He has trouble expressing himself on paper. His Spanish language capability is a decided asset to the Branch. A longstanding illness has limited his effectiveness at the Desk. He is cost conscious and has no supervisory responsibilities.

Comments by Present Supervisor:

I concur in the above estimate of Mr. Hidalgo's operational capabilities. During the months (Oct 1966 - March 1967) I have worked with Mr. Hidalgo I have not found his health to be a factor in his performance of his duties.

Ken Knaus

SECTION D

CERTIFICATION AND COMMENTS

1. BY EMPLOYEE
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE 10 March 67 SIGNATURE OF EMPLOYEE *Belard J. Hidalgo*

2. BY SUPERVISOR
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

11
DATE 9 MAR 1967 OFFICIAL TITLE OF SUPERVISOR Formerly C/WH/2/P
Present C/WH/2/P
TYPED OR PRINTED NAME AND SIGNATURE *Edwin J. Tsikerdanos*
Ken Knaus

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL
Mr. Hidalgo's health caused him to be absent from his duties several times during the first part of 1966 but these absences were for a limited period. From my observation, his health has not presented a serious problem to the performance of his duties.

Several times during the absence of Mr. Tsikerdanos in the year 1966 Mr. Hidalgo was the acting desk officer. His performance was most satisfactory, and his supervision of the other desk employees, albeit for a limited period, was fully satisfactory.

DATE 10 MAR 1967	OFFICIAL TITLE OF REVIEWING OFFICIAL C/WH/2	TYPED OR PRINTED NAME AND SIGNATURE <i>Edwin M. Terrell</i>
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SECRET

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER			
SECTION A				GENERAL			
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH		3. SEX	4. GRADE	5. SD	
H. ALDO, Palmez A., Jr.		27-1-19		M	GL-12	D	
6. OFFICIAL POSITION TITLE		7. OFF/DIV/GR OF ASSIGNMENT		8. CURRENT STATION			
C.I.C. of ICUS		DD-17/C		HQ-quarters			
9. CHECK (X) TYPE OF APPOINTMENT				10. CHECK (X) TYPE OF REPORT			
X CAREER		RESERVE	TEMPORARY	INITIAL		REASSIGNMENT SUPERVISOR	
CAREER-PROVISIONAL (See Instructions - Section C)				A ANNUAL		X REASSIGNMENT EMPLOYER	
SPECIAL (Specify):				SPECIAL (Specify):			
11. DATE REPORT DUE IN O.P.				12. REPORTING PERIOD (From - to)			
16-1-65 - 30-1-65 or later 1-65							
SECTION B				PERFORMANCE EVALUATION			
<p><u>W - Weak</u> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment, or to separation. Describe action taken or proposed in Section C.</p> <p><u>A - Adequate</u> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p><u>P - Proficient</u> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p><u>S - Strong</u> Performance is characterized by exceptional proficiency.</p> <p><u>O - Outstanding</u> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>							
SPECIFIC DUTIES							
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).							
SPECIFIC DUTY NO. 1 Headquarter desk officer responsible for the support of Miami Station CI/CE activities and operations.							RATING LETTER
							P
SPECIFIC DUTY NO. 2 Advisor to various components of the WH and WE Divisions on Cuban operations with specific reference to the Cuban Security Intelligence Service, organization, modus operandi and							RATING LETTER
							S
SPECIFIC DUTY NO. 3 Briefing representatives of personnel. foreign liaison services and selected agents visiting in Washington on the Cuban Security and Intelligence Services and his own unique experience in the Communist Party.							RATING LETTER
							S
SPECIFIC DUTY NO. 4 Translator/interpreter: Served as consultant to WH Division on Cuban Spanish.							RATING LETTER
							S
SPECIFIC DUTY NO. 5							RATING LETTER
SPECIFIC DUTY NO. 6							RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION							
<p>Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.</p> <p>4 JAN 1965</p>							
							RATING LETTER
							S
FORM 45 OBSOLETE PREVIOUS EDITIONS				SECRET			
4-62				Table 1 Standard form for rating performance and promotion			

SECRET

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.</p> <p>Mr. Hidalgo is an able intelligence officer, dedicated to his profession and selfless in his desire to be of service to the Government. Although he has suffered ill health in recent years, he was insistent that he be among the first to be sent to the Dominican Republic when the crisis occurred.</p> <p>An intense person, Mr. Hidalgo is industrious, works well under pressure and sets high standards for his performance. Because he is intent on getting things done, he is occasionally hasty in judgment and in written presentation of the results of his research and conclusions. He is perceptive, quickly accepts suggestions and offers counter-proposals with cogent argument. Mr. Hidalgo was not in a supervisory capacity. He was cost conscious; always endeavoring to be conservative where possible.</p> <p>He is an effective and cooperative member of an office, ready to assume responsibility and to help his colleagues. Thanks to his unique experience on the Cuban target, he has wide knowledge of the Cuban problem and is, in fact, an expert on the Cuban Security and Intelligence Services.</p>			
SECTION D		CERTIFICATION AND COMMENTS	
1. BY EMPLOYEE		I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT	
DATE	SIGNATURE OF EMPLOYEE		
9 December 1965	<i>Susan L. Darling</i>		
2. BY SUPERVISOR		IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION	
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	8 months		
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
9 December 1965	C/WH/C/MO/FI-CI	<i>Susan L. Darling</i>	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>I concur with the supervisor's assessment of Mr. Hidalgo with the exception to the statement that Subject works well under pressure. He is indeed an intense person and, under great pressure, his involvement affects his performance; and even more important, it has a very bad effect on his health. With this consideration noted, the undersigned thinks very highly of Mr. Hidalgo and would be pleased to be associated with him again.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
9 December 1965	C/WH/C/MO	<i>Walter T. Cini</i>	

SECRET

SECRET

(Form Filled in)

1. FILE NUMBER		BIOGRAPHIC PROFILE (PART 1/CD: 16 Jul 1946)					
27630		3. NAME (Last, First, Middle)		4. DATE OF BIRTH		5. LONGEVITY COM. DATE	
Ramon Jimenez Jr.		M May 1919		17 May 1958			
6. MARITAL STATUS		7. DEPENDENTS		8. YEAR(S) OF BIRTH		9. U.S. NATURALIZATION DATE(S)	
Married		0		3 1927-1945-1950		NA Puerto Rico NA	
10. CARRIER STATUS		11. MEMBERSHIP		12. FORMER STATUS		13. LAST MED. DPT. DUAL POS.	
D				Pending		Sep 1962 Dpt Only	
14. CURRENT RESERVE STATUS		15. HOME SERVICE		16. GRADE		17. ACTIVE DUTY WITH CIA CAT-4	
D		X		O-5		RELEASED TO CIA 1958-1962 TO BE REVIEWED	
18. ASSESSMENT DATE		19. PROFESSIONAL TEST DATE		20. LANGUAGE PROFICIENCY TEST DATE			
None		Feb 1958		None			
19. NON-CIA EMPLOYMENT							
1940-43 Military Service, US Army, Cpl - Infantry 1943-45 Jersey City, Merchant Marine, Dept. Jersey City, NJ - Inspector 1945-47 Francis H. Lassett Co (Food Wholesaler), NYC - Correspondence Clerk 1946-49 Dept. of Justice, FBI, NYC - Contract Agent on a Penetration Project 1948-50 Colonial Trust Co (Bank), NYC - Collections Clerk 1950-51 American Trust Co (Bank), NYC - Collections Clerk 1951 Dept. of Defense, New York QM Procurement Agency, NYC - Inspector							
20. NON-CIA EDUCATION							
1945-46 New York University - Foreign Trade, Business Law							
21. FOREIGN LANGUAGE ABILITIES (Languages, Proficiency, Date Tested)		Portuguese - R-Interm; W, P, S, U Zero (Oct 1959); T None - May 1958 Spanish - R High; W Interim; P, S, U Native (Nov 1959); Translate, Interpret - May 1958					
22. AGENCY SPONSORED TRAINING							
1958 Comm Party Org & Ops 1958 Intel Orient 1958 CI Famil 1959 Picks & Locks 1958 Info Rptng, Rpts & Rpts 1959 Audio Surveil Mgmt 1958 Operations							
23. CIA EMPLOYMENT HISTORY SINCE 18 SEPT 1947 (Personnel Actions, Military Orders, and Principal Details)							
EFFECTIVE DATE	POSITION TITLE & OCCUPATIONAL CODE	GRADE	SD	ORGANIZATION & DEPT. TITLE (if any)	LOCATION		
Mar 1958	Feb 1958 - Mar 1958, Contract Employee for DDP/WA/Project HYPOTHESES Area Ops Off. 0136.01 11 D			DDP/WA-III/Central America	Hq		
Jan - Feb 1959	DDP/WA-III/Central America						
Jun 1959	Jan - Feb 1959, TDY Mexico and Guatemala						
Jun 1960	Instructor (Ops) 1711.50 11 D			OTR/Ops School/Covert Trng	Hq		
Aug 1961	Ops Off 0136.01 11 D			DDP/WA-4			
Jan 1962	" " 0136.01 11 D			DDP/WA-4/FI-CI Sec			
Apr 1963	" " 0136.01 11 D			DDP/WA-4/Plans & Ops Stf/Sec A			
				DDP/SAS/US Fld/forward Ops Sta	JMWAVE		
24. DATE REVIEWED		25. PROFILE REVIEWED BY		26. ITEMS 1-10 REVIEWED & VERIFIED BY EMPLOYEE		27. PROFILE	
24 Oct 1963		OP/POD/017/hmc/rwh		9 Feb 1960		9 Feb 1960	

Form 1200 (PART 1) See Previous Sections

-- SECRET --

-- PROFILE --

64

SECRET

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PERS. SERIAL NO. 27630	BIOGRAPHIC PROFILE (PART 2)	
NAME (Last-First-Middle) HIDALGO, Balnes Nieves, Jr.		DATE OF BIRTH May 1919
		
24. SUMMARY OF CAREER PREFERENCE OUTLINE AND/OR FIELD REASSIGNMENT QUESTIONNAIRE		
25. IDENTITY OF OTHER DOCUMENTS WHICH SHOULD BE REVIEWED IN DETAIL		
26. ADDITIONAL INFORMATION		
27. DATE REVIEWED	28. PROFILE REVIEWED BY OP/POD/QAB	

49. DATE ACQUIRED

40. **Positive reviews of**

PROFILE

143

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER											
SECTION A				GENERAL											
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH		3. SEX	4. GRADE										
HIDALGO, BALMES		27 May 1919		M	GS-11 D										
5. OFFICIAL POSITION TITLE Ops. Officer		6. OFF/DIV/DR OF ASSIGNMENT		7. CURRENT STATION											
7. CHECK (X) TYPE OF APPOINTMENT CAREER RESERVE TEMPORARY CAREER-PROVISIONAL (See Instructions - Section C) SPECIAL (Specify):		8. CHECK (X) TYPE OF REPORT INITIAL ANNUAL SPECIAL (Specify):		REASSIGNMENT SUPERVISOR REASSIGNMENT EMPLOYEE											
9. DATE REPORT DUE IN O.P. 30 October 1962		10. REPORTING PERIOD (From - To) 17 Jan 62 - 30 Sep 62													
SECTION B PERFORMANCE EVALUATION															
<table border="0"> <tr> <td>W - Weak</td> <td>Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</td> </tr> <tr> <td>A - Adequate</td> <td>Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</td> </tr> <tr> <td>P - Proficient</td> <td>Performance is more than satisfactory. Desired results are being produced in a proficient manner.</td> </tr> <tr> <td>S - Strong</td> <td>Performance is characterized by exceptional proficiency.</td> </tr> <tr> <td>O - Outstanding</td> <td>Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</td> </tr> </table>						W - Weak	Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.	A - Adequate	Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.	P - Proficient	Performance is more than satisfactory. Desired results are being produced in a proficient manner.	S - Strong	Performance is characterized by exceptional proficiency.	O - Outstanding	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.
W - Weak	Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.														
A - Adequate	Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.														
P - Proficient	Performance is more than satisfactory. Desired results are being produced in a proficient manner.														
S - Strong	Performance is characterized by exceptional proficiency.														
O - Outstanding	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.														
SPECIFIC DUTIES															
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).															
SPECIFIC DUTY NO. 1					RATING LETTER										
Responsible for initiation and development of WH Division durable assets program.					P										
SPECIFIC DUTY NO. 2					RATING LETTER										
Collate and maintain files on espionage laws of LA countries.					P										
SPECIFIC DUTY NO. 3					RATING LETTER										
Served as interpreter and translator for Division LA contacts.					P										
SPECIFIC DUTY NO. 4					RATING LETTER										
Coordinated with Branch 1 of WHD on FI and CI matters.					P										
SPECIFIC DUTY NO. 5					RATING LETTER										
Gives lectures as guest instructor to students attending School of International Communism.					S										
SPECIFIC DUTY NO. 6					RATING LETTER										
OVERALL PERFORMANCE IN CURRENT POSITION															
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.					RATING LETTER										
P															

SECRET

(When filled in)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Method of performance of managerial or supervisory duties must be described, if applicable.

Mr. Hidalgo joined WH/PO/A in November 1961 and took up those responsibilities listed above. However, Mr. Hidalgo's performance of duties was interrupted on two occasions by serious illness, 9-27 March and 15 April-31 May 1962. He was twice hospitalized. From 25 June-9 August 1962, Mr. Hidalgo was on TDY for WH/3 as escort officer for Latin American trainees. Although beset by health and other personal problems, Mr. Hidalgo seized upon each new assignment with his customary energy. He proved particularly adept in working as interpreter and escort officer for Latin American trainees, and demonstrated high interest and proven competence in counterintelligence work. His excellent memory and quick perception were distinct assets in these undertakings.

It is recommended, however, that Mr. Hidalgo's next assignment not carry responsibility for submission of finished papers or staff studies, but be one entailing duties commensurate with his ability to work effectively with indigenous personnel and to pursue CI leads through records investigation.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

SIGNATURE OF EMPLOYEE

18 Sept 62

Delmer L. Hidalgo

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

18 September 1962

C/WH/PO/A

[Signature]

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I have had insufficient personal contact with Subject to make any meaningful comments.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPE

IRE

13 September 1962

C/WH/OPS

SECRET

SECRET
(Not Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER 027630	
SECTION A		GENERAL				
1. NAME HIDALGO Balles M. Jr.	2. DATE OF BIRTH 27 May 1919	3. SEX Male	4. GRADE GS-11			
5. SERVICE DESIGNATION D. Operations Officer	6. OFFICIAL POSITION TITLE DDP/MH, Br. 4, D.C.				7. OFF. DIV. OR BR. OF ASSIGNMENT	
8. CAREER STAFF STATUS NOT ELIGIBLE PENDING		9. INITIAL X ANNUAL	TYPE OF REPORT REASSIGNMENT SUPERVISOR			REASSIGNMENT EMPLOYEE
10. DATE REPORT DUE IN O.P. 31 October 1961	11. REPORTING PERIOD 6Oct60 - 30Sep61	12. SPECIAL (Specify)				
SECTION B EVALUATION OF PERFORMANCE OF SPECIFIC DUTIES						
List up to six of the most important specific duties performed during the rating period. Insert rating number which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).						
1. Unsatisfactory	2. Barely adequate	3. Acceptable	4. Competent	5. Excellent	6. Superior	7. Outstanding
SPECIFIC DUTY NO. 1 Hqs. C.O. for 3 major CI/PI Projects-at one time comprising 301 Agents. Originates operational traffic, Support traffic and maintains records and files.		RATING NO. 5	SPECIFIC DUTY NO. 4 Responsible for spotting, interviewing and recruiting of Cuban students in the U. S. for return to Cuba for operational purposes.		RATING NO. 5	
SPECIFIC DUTY NO. 2 Hqs. C.O. for 8 unilateral independent Agents, including originating operational and Support traffic, and maintaining proper records and files.		RATING NO. 4	SPECIFIC DUTY NO. 5		RATING NO.	
SPECIFIC DUTY NO. 3 Interviewing, briefing and debriefing Spanish only speaking Agents and contacts for all operational Sections of the Branch.		RATING NO. 6	SPECIFIC DUTY NO. 6		RATING NO.	
SECTION C EVALUATION OF OVERALL PERFORMANCE IN CURRENT POSITION						
Take into account everything about the employee which influences his effectiveness in his current position - performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the rating number in the box corresponding to the statement which most accurately reflects his level of performance:						
1. Performance in many important respects fails to meet requirements. 2. Performance meets most requirements but is deficient in one or more important respects. 3. Performance clearly meets basic requirements. 4. Performance clearly exceeds basic requirements. 5. Performance in every important respect is superior. 6. Performance in every respect is outstanding.						RATING NO. 5
SECTION D DESCRIPTION OF THE EMPLOYEE						
In the rating boxes below, check (X) the degree to which each characteristic applies to the employee.						
1. Least possible degree	2. Limited degree	3. Normal degree	4. Above average degree	5. Outstanding degree		
CHARACTERISTICS				NOT APPLI-CABLE	NOT OBSERVED	RATING
GETS THINGS DONE						X
RESOURCEFUL						X
ACCEPTS RESPONSIBILITIES						X
CAN MAKE DECISIONS ON HIS OWN WHEN NEED ARISES						X
DOES HIS JOB WITHOUT STRONG SUPPORT						X
FACILITATES SMOOTH OPERATION OF HIS OFFICE						X
WRITES EFFECTIVELY						X
SECURITY CONSCIOUS						X
THINKS CLEARLY						X
DISCIPLINE IN ORIGINATING, MAINTAINING AND DISPOSING OF RECORDS						X
OTHER (Specify):						

SEE SECTION "E" ON REVERSE SIDE

SECRET

(This section is optional)

SECTION E

NARRATIVE DESCRIPTION OF MANNER OF JOB PERFORMANCE

Stress strengths and weaknesses demonstrated in current position. Indicate suggestions made to employee for improvement of his work. Give recommendations for his training. Describe, if appropriate, his potential for development and for assuming greater responsibilities. Amplify or explain, if appropriate, ratings given in SECTIONS B, C, and D to provide the best basis for determining future personnel actions.

Mr. Hidalgo has done a fine job during the reporting period, while assigned to the CI Section of the Branch when it was in its most active period of buildup and operations. The manner in which he accepted any assignment is unusual and he was often working under pressure. During the period, he was on several temporary duty trips in connection with operational activities, which he completed very well.

He has a talent for getting along with and understanding Latin Americans, and with his fluent Spanish language capability, he has performed in a commendable manner. While Mr. Hidalgo has never shunned responsibility, his assignment did entail the delegation of extensive responsibility. It is the feeling of the Rating Officer that he should be given the opportunity for greater responsibility, and training, which will qualify him for a supervisory role. After that, he should be qualified in all respects for promotion to GS-12.

SECTION F

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I certify that I have seen Sections A, B, C, D and E of this Report.

DATE

SIGNATURE OF EMPLOYEE

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

11

Subject hospitalized.

IF REPORT IS NOT BEING MADE AT THIS TIME, GIVE REASON.

EMPLOYEE UNDER MY SUPERVISION LESS THAN 90 DAYS

REPORT MADE WITHIN LAST 90 DAYS

OTHER (Specify):

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

20 March 62

D/Chief, WH/4/CI

[Redacted]

3.

BY REVIEWING OFFICIAL

 I WOULD HAVE GIVEN THIS EMPLOYEE ABOUT THE SAME EVALUATION. I WOULD HAVE GIVEN THIS EMPLOYEE A HIGHER EVALUATION. I WOULD HAVE GIVEN THIS EMPLOYEE A LOWER EVALUATION. I CANNOT JUDGE THESE EVALUATIONS. I AM NOT SUFFICIENTLY FAMILIAR WITH THE EMPLOYEE'S PERFORMANCE.

COMMENTS OF REVIEWING OFFICIAL

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

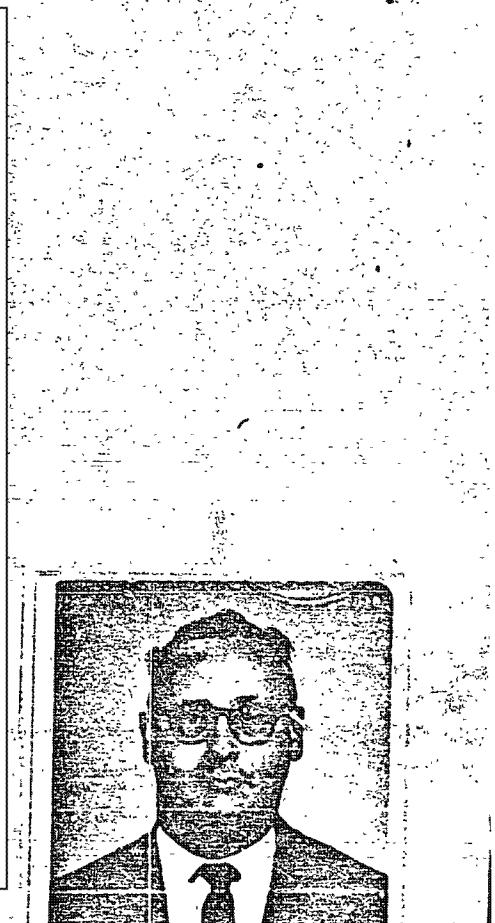
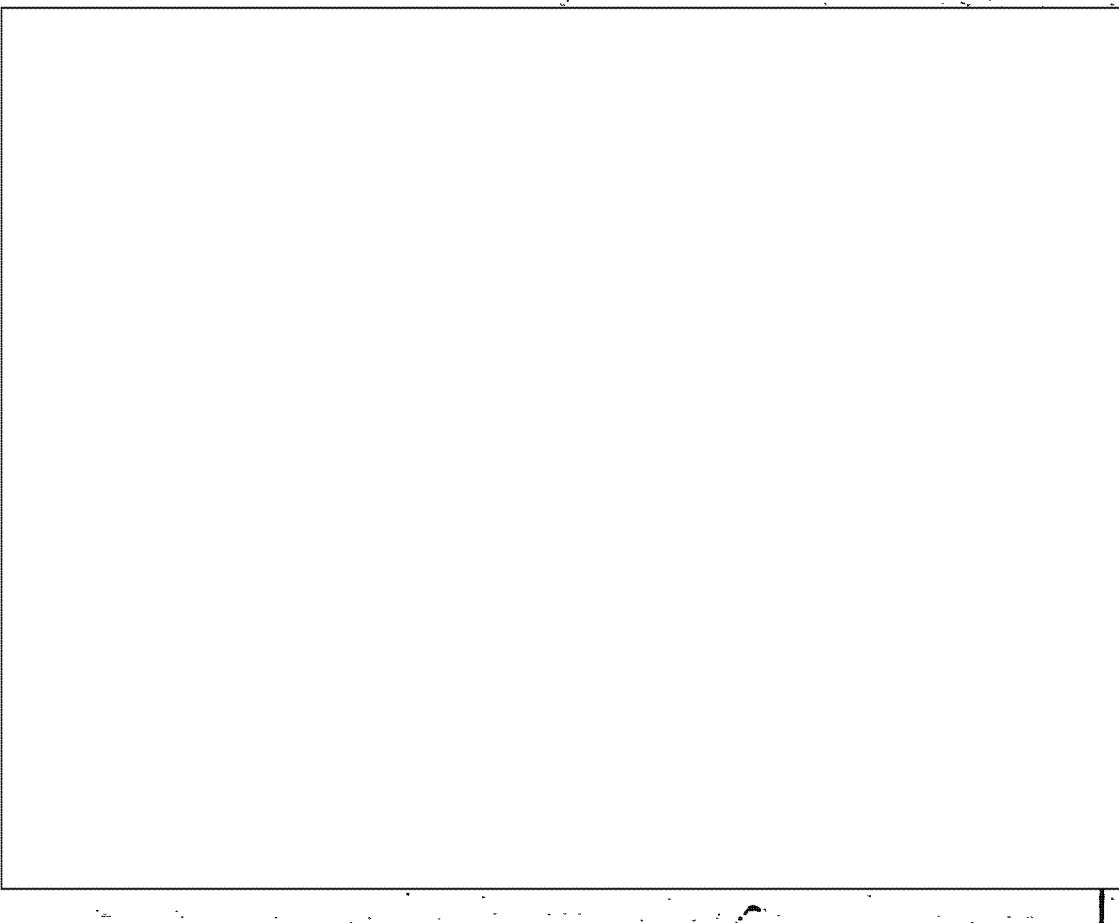
TYPED OR PRINTED NAME AND SIGNATURE

21 March 1962

C/WH/4/CI

[Redacted]

SECRET



THIS IS A SECRET REPORT PAPER

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 91-231 AND EXECUTIVE ORDER 11524 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A DCI DIRECTIVE DATED 8 OCT 1962"

EFFECTIVE DATE OF PAY ADJUSTMENT:

NAME	SERIAL ORGN. F-13 S-GR-STEP	NEW SALARY
HIDALCO, B. N., JR.	00730 51 250 V 12 5	\$16,034

1. LAST NAME	FIRST NAME	INITIAL(S)	2. APPOINTMENT DATA	3. TOTAL SERVICE FOR LEAVE (as of _____ of 1968)
			Entered on duty F.T. P.T.	Years Months Days
			Subject to Sec 203(d) 1933 Leave Act Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/> More than 15 years
			Ceased to be subject to Sec 203(d) on _____ Annual Leave Bal	
4. DATE AND NATURE OF SEPARATION RETIREMENT-DISABILITY-UNDER CIA RET AND DIS SYSTEM EFF 2/28/70				
5. SUMMARY OF ANNUAL AND SICK LEAVE (HOURS)				
5. Balance from prior leave year ended 1970	ANNUAL	SICK	6. Current leave year accrual through 1970	
	46	8	24	12
7. Total	70	20		
8. Reduction in credits, if any (current year)			9. Total leave taken	
	4	20	10. Balance	66 -0-
11. Total hours paid in lump sum	66 hrs			
12. Salary rate(s)	\$15,173.00			
13. Lump sum leave dates from 0830 3/02/70 to 3/11/70 1030 (Hours)				
20. Certified - object by _____ (Signature) for Chief Payroll (Title)	3/13/70 Date 113-2585 (Telephone)	21. Dates during current calendar yr _____ to _____ 22. Dates during preceding calendar yr _____ to _____		
23. During leave year in which separated 24. During stop increase working period which began on 12/15/68 25. During 12-month HI accrual period (dates)				
26. LWOP or; AWOL or Furlough; Suspension (Hours)				

5-21-70

70-1271

70-1556

Mr. Balines N. Hidalgo, Jr.
403 Silver Rock Road
Rockville, Maryland 20851

3-1 MAR 1970

Dear Mr. Hidalgo:

As you bring to a close more than twenty years of service to your country, I want to join your friends and co-workers in wishing you well and hoping that you find the years ahead filled with enjoyment and satisfaction.

It takes the conscientious efforts of many people to do the important work of this Agency. You leave with the knowledge that you have personally contributed to our success in carrying out our mission. Your faithful and loyal support has measured up to the high ideals and traditions of the Federal service.

May I express to you my appreciation and extend my best wishes for the years ahead.

Sincerely,

Richard Helms
Richard Helms
Director

Distribution:

0 - Addressee
1 - DDCI
1 - ER
1 - C/EAB/OS
1 - D/Pers
1 - OPF
1 - ROB Soft File *Concur
1 - FOB Reader

Originator:

DDC Director of Personnel
Director of Personnel
C/EAB/OS

OP/RAD/ROB/ [redacted] at 3257 (5 March 1970)

P B SFP 1970

Mr. Raines N. Hidalgo, Jr.
403 Silver Rock Road
Rockville, Maryland 20851

Dear Mr. Hidalgo:

It is the practice of the Organization to follow up with former employees six months after their retirement. We hope by such inquiry to obtain information on what our retirees are doing and where they are located, invite suggestions for improving the retirement program and to learn if the Organization might be of some assistance on any post-retirement matters.

We should like very much to hear from you on the above points and on any other topics you think would be useful to us.

For your convenience in replying, we have enclosed a sheet somewhat akin to a form on which we have listed those standard items of information we'd like to have on every retiree. The remainder of the sheet, including the reverse side, is for your comments and suggestions. We shall be most appreciative of your fullest response to this inquiry.

Thank you very much for your cooperation.

Sincerely yours,

Carroll A. Duchay
Personnel Officer

Enclosures:
Questionnaire
Return Envelope

Distribution:
Original - Addressee
1 - OPF
1 - RAD Subject's File

OP/RAD/EFAB/[redacted]:dag (31 Aug 70)

SECRET

(When Filled In)

DDU: 14 MAR 70

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (LAST, FIRST, MIDDLE)		3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT				
027630		HEDALCO, G. N. R.		RETIREMENT-DISABILITY-UNDER CIA RETIREMENT-DISABILITY-SYSTEM		MO DA YR		6. FUNDING				
FUNDING		V TO V		V TO CF		7. FINANCIAL ANALYSIS NO CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY				
		CF TO V		CF TO CF		040000000000		P.L. 88-463 SECT. 1231				
9. ORGANIZATIONAL DESIGNATIONS DDP/WH BRANCH 2 SECTION:												
11. POSITION TITLE					12. POSITION NUMBER		13. SERVICE DESIGNATION					
CPS OFFICER					1310		15					
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)			15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE					
GS			OF38.01		12 5		15173					
18. REMARKS												
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL												
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING	22. STATION CODE	23. INTEGEE CODE	24. HIRING CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEFT				
45	10	NUMERIC	ALPHABETIC			MO DA YR	MO DA YR	MO DA YR				
28. NTE EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. Correction / Cancellation Data					33. SECURITY REG. NO.			
MO DA YR		CSC 2. CIA 3. NSA 4. None	CODE -E0000	TYPE -E0000	MO DA YR				34. SEN			
35. VET PREFERENCE	36. SERV COMP. DATE	37. LONG COMP. DATE	38. CAREER CATEGORY	39. FEGL - HEALTH INSURANCE	40. SOCIAL SECURITY NO.							
CODE 0. NONE 1. 5 PT 2. 10 PT	MO DA YR	MO DA YR	CAR. BUSY PROV. TEMP	CODE 1. YES 2. NO	CODE 0. WAIVER 1. YES	HEALTH INS CODE						
41. PREVIOUS CIVILIAN GOVERNMENT SERVICE					42. LEAVE CAT. CODE	43. FEDERAL TAX DATA						
CODE 0. NO PREVIOUS SERVICE 1. NO BREAK IN SERVICE 2. BREAK IN SERVICE (LESS THAN 3 YRS.) 3. BREAK IN SERVICE (MORE THAN 3 YRS.)		CODE	FORM EXECUTED 1. YES 2. NO	NO TAX EXEMPTIONS	FORM EXECUTED 1. YES 2. NO	CODE	NO TAX STATE CODE EXEMPT					
SIGNATURE OR OTHER AUTHENTICATION												
POSTED 63-05-70 jsc												

BSW: 4 MAR 70

NOTIFICATION OF PERSONNEL ACTION									
O&P		1. SOCIAL NUMBER		2. NAME (LAST FIRST MIDDLE)		3. NATIONALITY		4. PERSONNEL ACTION	
027630		MIDALOO, D. M. JR						RETIREMENT - DISABILITY - UNDER CIA RETIREMENT AND DISABILITY SYSTEM	
FUNDING		V TO V		V TO CP		EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT	
X		CP TO V		CP TO CP		02 20 70		REGULAR	
6. ORGANIZATIONAL DESIGNATIONS									
					7. Name of Agency to Charge				
					8. CSC OR OTHER POLITICAL AUTHORITY				
					P.L. 88-643 SECT. 231				
					9. LOCATION OF OFFICIAL STATION				
					10. LOCATION OF OFFICIAL STATION				
11. POSITION TITLE					12. POSITION NUMBER		13. SERVICE DESIGNATION		
O&P OFFICER					1310		D		
14. CLASSIFICATION SCHEDULE (GS, E, etc.)		15. OCCUPATIONAL SERIES			16. GRADE AND STEP		17. SALARY OR RATE		
GS		0136.01			12 5		13173		
18. REMARKS									
SIGNATURE OR OTHER AUTHENTICATION									

"DAY" AGREEMENT IN ACCORDANCE WITH SECTION 2(2) OF P. 90-206 AND EXECUTIVE ORDER 11476 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND 4 DCI DIRECTIVE DATED FORTY-THREE, 1949.

EFFECTIVE DATE OF PAYMENT ADJUSTMENT: 13 JUL 1969

NAME: HIGAEGO, R. M. - SERIAL: 027630 - RANK: GS-12 - STANDING: SALARY

"PAY ADJUSTMENT IN ACCORDANCE WITH SECTIONS 212-4 & 215 OF PL 90-266 AND EXECUTIVE ORDER 11613 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENTS: 14 JULY 1968

NAME	SERIAL	ORGN.	FUNDS	CH-STEP	OLD SALARY	NEW SALARY
HIDALGO B N JR	027630	51 350	V	GS 12 4	\$12,607	\$13,392

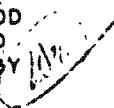
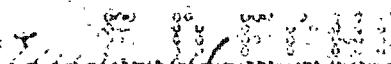
"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 90-266 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENTS: 8 OCTOBER 1967

NAME	SERIAL	ORGN.	FUNDS	CH-STEP	OLD SALARY	NEW SALARY
HIDALGO B N JR	027630	51 350	V	GS 12 4	\$12,604	\$12,607

C/WK/2

630

1. Employee Number	2. Employee Name	3. Civil Service Number	4. LWOP Hours						
027630	HIGALGO B N JR	41-390							
5. OLD SALARY RATE		6. NEW SALARY RATE							
Grade	Step	Salary	Grade	Step	Salary	Effective Date	PS	LS	AD
GS 12	3	\$11,685	GS 12	4	\$12,064	12/14/66			773
8. Remarks and Authorizations									
<input checked="" type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input checked="" type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS AUDITED BY 									
I CERTIFY THAT THE WORK OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.									
SIGNATURE:  DATE: Dec 12 1966									
PAY CHANGE NOTIFICATION									

SUGAR
WINE FESTIVAL

NOTIFICATION OF PERSONNEL ACTION

NOTIFICATION OF PERSONNEL ACTION									
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)							
C27630		H. BALOGH D. N. JR.							
3. NATURE OF PERSONNEL ACTION		4. EXECUTIVE DATE		5. CATEGORY OF EMPLOYMENT					
DEMISSION AS PARTICIPANT IN CIA RETIREMENT AND DISABILITY SYSTEM		1968-04-10		REG. AR					
6. FUNDS		V TO V	V TO C	7. COST CENTER NO (CHARGEABLE)		8. ESC OR OTHER LEGAL AUTHORITY			
X		CP TO V	CP TO C	635000240000		F 112643 DECT. 2003			
9. ORGANIZATIONAL DESIGNATIONS									
DOP/WH BASH., D. C.									
11. POSITION TITLE		12. POSITION NUMBER		13. SERVICE INFORMATION					
14. CLASSIFICATION SCHEDULE (IS, LS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE					
18. REMARKS YOU ARE HEREBY NOTIFIED OF YOUR RIGHT TO APPEAL THIS ACTION TO THE DIRECTOR OF CENTRAL INTELLIGENCE IN ACCORDANCE WITH THE REGS. 105.1 OF THE 20-500. SUCH APPEAL MUST BE RECEIVED IN THE OFFICE OF THE DIRECTOR WITHIN 30 CALENDAR DAYS FROM THE EFFECTIVE DATE OF THIS ACTION.									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION BY Employee Code	20. OFFICE CODING	22. STATION	23. OFFICE USE	24. Name	25. DATE OF BIRTH	26. DATE OF COMB	27. DATE OF RET		
	SYSTEM ALPHABETICAL	CODE	CODE	NAME	MM DD YY	MM DD YY	MM DD YY		
28. RET. EXPENSES	29. SPECIAL DIFFERENCE	30. RETIREMENT DATE	31. SEPARATION DATE	32. RECOGNIZED COMBINATION DATE	33. RETIREMENT DATE	34. RETIREMENT DATE	35. RETIREMENT DATE	36. RETIREMENT DATE	37. RETIREMENT DATE
MM DD YY		MM DD YY	MM DD YY	MM DD YY	MM DD YY	MM DD YY	MM DD YY	MM DD YY	MM DD YY
38. RET. PREFERENCE	39. SEPAR. COMB. DATE	40. LS/SC/CC/COMP. DATE	41. CARRYOVER COMB. DATE	42. PENSION COMB. DATE	43. PENSION COMB. DATE	44. PENSION COMB. DATE	45. PENSION COMB. DATE	46. PENSION COMB. DATE	47. PENSION COMB. DATE
MM DD YY	MM DD YY	MM DD YY	MM DD YY	MM DD YY	MM DD YY	MM DD YY	MM DD YY	MM DD YY	MM DD YY
48. PREVIOUS PAYMENT STATUS DATE	49. LEAVE LIST	50. PENSION PAY DATE	51. PENSION PAY DATE	52. PENSION PAY DATE	53. PENSION PAY DATE	54. PENSION PAY DATE	55. PENSION PAY DATE	56. PENSION PAY DATE	57. PENSION PAY DATE
MM DD YY	CCRS	MM DD YY	MM DD YY	MM DD YY	MM DD YY	MM DD YY	MM DD YY	MM DD YY	MM DD YY
REMARKS OR OTHER INFORMATION									

SEARCH

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Les Provinces Lorries

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8-10-63 22
9-12-63 27

Wheaton College

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 69-504 PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949, AS AMENDED, AND A-DCI DIRECTIVE DATED 8 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENTS: 30 JUNE 1966

NAME	SERIAL	ORG.	FUND	GRANTER	OLD SALARY	NEW SALARY
HIDALGO S S JR	027630	51	350	V	\$5,025	\$11,355

EMPLOYEE NUMBER		NAME		SALARY RATE		LWOP PAY		
377438		WILBURSON, JR.		\$1,500		%		
OLD SALARY RATE				NEW SALARY RATE		TYPE ACTION		
From	To	From	To	From	To	From	To	
45	12	2	10,907	17/20/84	45	12	11,355	12/1/85
XXXXXX								
- NO EXCESS LWOP - IN PAY STATUS AT END OF WAITING PERIOD LWOP STATUS AT END OF WAITING PERIOD - CLERKS INITIALS: <u> </u> AUDITED BY <u> </u>								
I CERTIFY THAT THE POPA OF THE ABOVE NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE <u> </u> 1/18/85								
SIGNATURE: <u> </u> DESHILE PAY CHANGE NOTIFICATION								

JH: 17 DEC 65

SECRET
(When Filed)

NOTIFICATION OF PERSONNEL ACTION											
OCF											
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)									
027630		HIDALGO B. N. JR.									
3. NATURE OF PERSONNEL ACTION											
REASSIGNMENT											
4. FUNDS		X		W 10 W		W 10 E		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT	
								12 19 65		REGULAR	
6. COST CENTER NO. CHARGEABLE											
6235 0620 0000 50 USC 403 J											
7. CSC OR OTHER LEGAL AUTHORITY											
10. LOCATION OF OFFICIAL STATION											
WASH., D.C.											
8. POSITION TITLE		12. POSITION NUMBER		13. SERVICE DESIGNATION							
OPS OFFICER		1318		D							
14. CLASSIFICATION SCHEDULE (SS, GS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE					
GS		0136.01		12 3		11355					
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE		20. EMPLOYEE CODE		21. OFFICE CODE		22. STATION		23. INTELLIGENCE CODE		24. GRADE	
37		10		51350		WH		75013		05 27 19	
25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEA							
28. DATE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA		32. CORRECTION/CANCELLATION DATA		33. SECURITY REG. NO.	
34. VET PREFERENCE		35. SERV. COMP. DATE		36. LONG. COMP. DATE		37. CAREER CATEGORY		38. DEATH / HEALTH INSURANCE		39. SOCIAL SECURITY NO.	
40. PREVIOUS GOVERNMENT SERVICE DATA		41. LEAVES EARLY		42. FEDERAL TAX DATA		43. STATE TAX DATA					
44. NO. PREVIOUS SERVICE		45. CODE		46. FEDERAL TAX CODE		47. STATE TAX CODE					
48. NO. YEARS IN SERVICE				49. TAX EXEMPTIONS		50. STATE TAX CODE					
51. DEATH IN SERVICE (LESS THAN 100%)				52. TAX EXEMPTIONS		53. STATE TAX CODE					
54. NATURE OR OTHER AUTHENTICATION											

FORM 1150
11-62Use Previous
Editions

SECRET

1150
FEDERAL EMPLOYEES
PAY RATE
CHART
(When Filed)1150
FEDERAL EMPLOYEES
PAY RATE
CHART
(When Filed)

"PAY ADJUSTMENT IN ACCORDANCE WITH SALARY SCHEDULES OF PL 89-301
PURSUANT TO AUTHORITY OF DCI AS PROVIDED IN THE CIA ACT OF 1949,
AS AMENDED, AND A-DCI POLICY DIRECTIVE DATED 4 OCTOBER 1962."

EFFECTIVE DATE OF PAY ADJUSTMENTS 10 OCTOBER 1965

NAME	SERIAL	ORGN.	FUNDS	GR-STEP	OLD SALARY	NEW SALARY
MIDALGO R N JR.	027630	51 500	V	GS 12 2	\$10,605	\$10,987

SECRET

(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

DOS: 04/27/65

1. SERIAL NUMBER		2. NAME (LAST/FIRST/MIDDLE)		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT	
027610		HIDALGO, B. N. JR.		05	31	65	6. CSC OR OTHER LEGAL AUTHORITY
3. NATURE OF PERSONNEL ACTION				7. COST CENTER, NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY	
REASSIGNMENT				5235 1162 0000			
9. FUND\$		X	V 10 V	V 10 O	10. LOCATION OF OFFICIAL STATION		
					WASH., D. C.		
11. POSITION TITLE				12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION	
APS OFFICER				1145		U	
14. CLASSIFICATION SCHEDULE (GS, LD, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE	
GS		0136.01		12			
18. REMARKS							
POSTED 6-9-65 HT							
SIGNATURE OR OTHER AUTHENTICATION							

3CF

1. Serial No.	2. Name	3. Code Center Number	4. LWOP Month							
027430	HIDALGO B N JR	49 997	43F							
5. OLD SALARY RATE		6. NEW SALARY RATE								
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADJ.
GS 12	1	\$10,250	12/22/63	GS 12	2	\$10,605	12/20/64			
8. Remarks and Authorization										
<input checked="" type="checkbox"/> NO EXCESS LWOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input checked="" type="checkbox"/> LWOP STATUS AT END OF WAITING PERIOD CLERKS INITIALS: <i>JK</i> AUDITED BY <i>JK</i>										
I CERTIFY THAT THE WORK OF THE ABOVE-NAMED EMPLOYEE IS OF AN ACCEPTABLE LEVEL OF COMPETENCE.										
SIGNATURE <i>JK</i> DATE <i>4-1-64</i>										
PAY CHANGE NOTIFICATION										

Form 9-61 500 Circular Pattern Edition

(4-51)

SECRET
(When Filled In)

MHC: 2 NOV 64

NOTIFICATION OF PERSONNEL ACTION											
1. OCF		2. NAME (LAST FIRST MIDDLE)									
027630		HIDALGO B N JR									
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT							
REASSIGNMENT		11 02 64		REGULAR							
6. FUNDS		V TO V	V TO CF	7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY					
		CF TO V	CF TO CF	5235 1162 0000		50 USC 403 J					
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION									
DDP/SAS COUNTERINTELLIGENCE STAFF OPERATIONS SECTION		WASH., D. C.									
11. POSITION TITLE		12. POSITION NUMBER		13. SERVICE DESIGNATION							
OPS OFFICER		0887		D							
14. CLASSIFICATION SCHEDULE (GS, GS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE					
GS		0136.01		12 1		10250					
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGEE CODE	24. HOURS CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LES		
37	10	49150 SAS		75013	1	05	27 19	NO DA	NO DA		
20. NTC EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA		33. SECURITY REQ NO	34. SEX		
NO DA YR		CODE		1 - CSC 2 - FICA 3 - NONE	CODE	TYPE	NO DA YR	EOD DATA	REQ NO		
35. VET. PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE	38. CAREER CATEGORY	39. FEGL / HEALTH INSURANCE		40. SOCIAL SECURITY NO			
CODE		NO DA YR		NO DA YR	CODE	CODE	CODE	CODE	CODE		
0 - NONE 1 - BFT 2 - TPT					PERM TEMP	0 - WAIVER 1 - YES	HEALTH INS CO				
41. PREVIOUS GOVERNMENT SERVICE DATA		42. LEAVE CAT		43. FEDERAL TAX DATA	44. STATE TAX DATA						
CODE		CODE		FORM EXECUTED CODE	NO TAX EXEMPTIONS	FORM EXECUTED CODE	NO TAX EXEMPTIONS	CODE	NO TAX STATE CODE		
0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)				1 - YES 2 - NO		1 - YES 2 - NO		1 - YES 2 - NO			
SIGNATURE OR OTHER AUTHENTICATION											
FROM: DEV COMP 2											
FOLTD 11/22/64 - JK											

FORM 11-62 1150

Use Previous Edition

SECRET

14-00000
EX-1000
EX-1000
EX-1000
EX-1000

(When Filled In)

ADJUSTMENT OF SALARY RATE IN ACCORDANCE WITH THE SCHEDULES OF THE GOVERNMENT EMPLOYEES SALARY REFORM ACT OF 1964 PURSUANT TO THE AUTHORITY OF THE DIRECTOR OF CENTRAL INTELLIGENCE AS PROVIDED IN THE CENTRAL INTELLIGENCE AGENCY ACT OF 1949, AS AMENDED, AND POLICY DIRECTIVE ISSUED BY THE ACTING DIRECTOR OF CENTRAL INTELLIGENCE DATED 8 OCTOBER 1962.

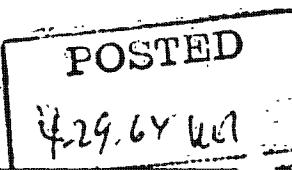
**SALARY CONVERTED TO RATE SHOWN FOR INDIVIDUAL'S GRADE
AND STEP AS INDICATED IN CHART BELOW.**

GENERAL SCHEDULE RATES
Federal Employees Salary Act of 1964

SECRET
(When Filled In)

DTP: 28 APR 84

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT		
027530		HIDALCO, S. N. US		MO. 04	DA. 10	TD. 00	REGULAR	
6. FUNDS		V TO V	V TO CP	7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY		
X		CP TO V	CP TO CP	4232 1980-1000		50 USC 403		
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION						
DOP/SAS CS/CS DEVELOPMENT COMPLEMENT		WASH., D.C.						
11. POSITION TITLE		12. POSITION NUMBER		13. SERVICE DESIGNATION				
OPS OFFICER		2227						
14. CLASSIFICATION SCHEDULE (GS, LS, GS)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE		
GS		0130.01		12.1		2280		
18. REMARKS OTHER								
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL								
19. ACTION CODE	20. EMPLOY. CODE	21. OFFICE CODING	22. STATION CODE	23. INTEGRITY CODE	24. HEIGHT CODE	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI
13	18	42227	SAS	25013	1	05 27 13	12 22 13	12 22 13
28. NTE EXPIRES		29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA	33. SECURITY REG. NO.	34. SEX	35. SOC. SECURITY NO.
						00000	M	
36. VET PREFERENCE		36. SERV. COMP. DATE	37. LONS. COMP. DATE	38. CAREER CATEGORY	39. FED. / HEALTH INSURANCE	40. SOCIAL SECURITY NO.		
CODE		MO DA YR	MO DA YR	CODE	CODE	0-DRIVERS	HEALTH INS. CODE	
0		07 11 84	03 11 75	1P	1	1 YES		
41. PREVIOUS GOVERNMENT SERVICE DATA		42. LEAVE EAT	43. FEDERAL TAX DATA	44. STATE TAX DATA				
CODE		CODE	NON-EXECUTED CODE	NO. TAX EXEMPTIONS	CODE	CODE	CODE	STATE CODE
0. NO PREVIOUS SERVICE					1. YES	2. NO	3. NO	
1. NO BREAK IN SERVICE								
2. BREAK IN SERVICE LESS THAN 5 YEARS								
3. BREAK IN SERVICE MORE THAN 5 YEARS								
SIGNATURE OR OTHER AUTHENTICATION								
								
FORM 11-82 1150		Our Previous Edition		28 APR 1984		SECRET		
<div style="border: 1px solid black; padding: 2px; float: right;">14-00000 When Filled In</div> <div style="border: 1px solid black; padding: 2px; float: right;">14-00000 When Filled In</div>								

SECRET

(When Filled In)

S-1 28 APR 64

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)		3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT	
027-30		Kirk, B K Jr		RESIGNATION		04 25 64		REGULAR	
6. FUNDS		V TO V		V TO CF		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY	
				X		4132 2001 1000			
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICER STATION		11. POSITION TITLE		12. POSITION NUMBER		13. SERVICE DESIGNATION	
DOP/SAS US FIELD FORWARD OPERATIONS STATION- JMWave CI SECTION		JMWave		OPS OFFICER		0731		D	
14. CLASSIFICATION SCHEDULE (GS, LS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE			
GS		0130.01		12 1		9180			
18. REMARKS									
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL									
19. ACTION CODE	20. Employ Code	21. OFFICE CODING	22. STATION CODE	23. INTEGRITY CODE	24. Hdqrs Code	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI	
15	10	NUMERIC	ALPHABETIC		NO DA YR	NO DA YR	NO DA YR	NO DA YR	
05				05 27 10					
28. ETE EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA		33. SECURITY REG NO	34. SEL REG NO		
02 04 YR		1. CSC 2. FICA 3. NONE	CODE	TYPE	NO DA YR				
			1800001	EOD DATA					
35. RET. PREFERENCE	36. SERV COMP DATE	37. LONG COMP DATE	38. CAREER CATEGORY	39. FEGL / HEALTH INSURANCE	40. SOCIAL SECURITY NO				
0206	NO DA YR	NO DA YR	CAR RENT CODE	CODE	0. WATER	HEALTH INS CODE			
			PERM TEMP		1. YES				
41. PREVIOUS GOVERNMENT SERVICE DATA	42. LEAVE CAT CODE	43. FEDERAL TAX DATA	44. STATE TAX DATA						
0206	0. NO PREVIOUS SERVICE 1. NO BREAK IN SERVICE 2. BREAK IN SERVICE LESS THAN 3 yrs 3. BREAK IN SERVICE (MORE THAN 3 yrs)		FORM EXECUTED CODE	NO TAX EXEMPTIONS	FORM EXECUTED	CODE	NO TAX EXEMPT	STATE CODE	
			1. YES		1. YES		2. NO		
SIGNATURE OR OTHER AUTHENTICATION									
429-64 61									

429-64
1150

Use Previous Edition

SECRET

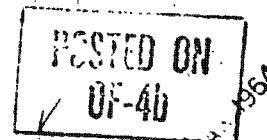
28 APR 64
28614-011
FEDERAL EMPLOYEES
PAY RATE SCHEDULE
DISTRIBUTION

(When Filled In)

525
01
IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87-793 AND OCT
MEMORANDUM DATED 1 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS
EFFECTIVE 3 JANUARY 1964.

NAME	SERIAL	ORGN FUNDS	GR-ST	OLD SALARY	NEW SALARY
██████████	027630	49 730	CF GS 12 1	\$ 9,475	\$ 9,980

Alvarez, L. H. Jr.



SECRET
(When Filled In)

20 DEC 63

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)									
027536		Hidalgo, R. A. Jr.									
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT							
PROMOTION		12/22/63		REGULAR							
6. FUNDS		V TO V	V TO CP	7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY					
		CP TO V	IX	H132 2001 1000		50 USC 403 J					
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION									
DOR SPECIAL AFFAIRS STAFF U. S. FIELD FORWARD OPERATIONS STATION-JMWAVE C.I. SECTION		JMWAVE									
11. POSITION TITLE		12. POSITION NUMBER		13. SERVICE DESIGNATION							
OPS. OFFICER		0731		D							
14. CLASSIFICATION SCHEDULE (GS, LS, PH)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE					
GS		0136.01		12 1		9175					
18. REMARKS											
36 Dec 63											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION: 20. EMPLOY. CODE		21. OFFICE CODING		22. STATION		23. INTEGEE CODE		24. Grade Code		25. DATE OF BIRTH	
22	10	40730	SAS	922101		?		MO DA YR	MO DA YR	MO DA YR	
26. DATE OF GRADE		27. DATE OF LEI									
28. MTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA		32. CORRECTION, CANCELLATION DATA		33. SECURITY REG. NO.	
NO DA YR		1 CSC 2 FICA 3 NONE		CODE		DATA CODE		TYPE	NO DA YR	REG. NO.	34. SEX
35. VET PREFERENCE		36. SERV. COMP. DATE		37. LONG. COMP. DATE		38. CAREER CATEGORY		39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO.	
CODE	3. VET 4. 90% 5. 100%	NO DA YR	NO DA YR	NO DA YR	NO DA YR	CODE	CODE	0. DRIVER 1. YES	HEALTH INS. CODE		
41. PREVIOUS GOVERNMENT SERVICE DATA				42. LEAVE CAT. CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA			
CODE	1.0. NO PREVIOUS SERVICE 1.1. NO BREAK IN SERVICE 1.2. BREAK IN SERVICE LESS THAN 1 MONTH 1.3. BREAK IN SERVICE MORE THAN 1 MONTH			FOR EXECUTED CODE	NO TAX EXEMPTIONS	FOR EXECUTED	CODE	NO TAX EXEMPT STATE CODE			
				1. YES 2. NO		1. YES 2. NO					
SIGNATURE OR OTHER AUTHENTICATION											
12/27/63/K											

SECRET
(When Filled In)

LLG: 25 APRIL 63

NOTIFICATION OF PERSONNEL ACTION

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)		H. Wayne							
3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT							
EXCELTED APPOINTMENT		04-29-63		REGULAR							
CAREER PROVISIONAL											
6. FUNDS		V TO V		V TO CP		7. COST CENTER NO. CHARGEABLE		8. CSC OR JTAIC LEGAL AUTHORITY			
		EF. 10 V		X		EF. 10 CP		3132 2001 1000 50 USC 403 J			
9. ORGANIZATIONAL DESIGNATIONS											
DDP SPECIAL AFFAIRS STAFF U. S. FIELD FORWARD OPERATIONS STATION-JMWAVE C1 SECTION											
10. POSITION TITLE						11. POSITION NUMBER			12. SERVICE DESIGNATION		
OPS OFFICER						3732			O		
14. CLASSIFICATION SCHEDULE (GS, LS, etc)			15. OCCUPATIONAL SERIES			16. GRADE AND STEP		17. SALARY OR RATE			
GS			0136.01			11 4		6840			
18. REMARKS											
POSTED BY 12-6-63 6 MAY 1963											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE		20. EMPLOYEE CODE		21. OFFICE CODING		22. STATION CODE		23. INTEGRIEE CODE		24. HEIGHT CODE	
13		10		61730		SAS		99999		MO DA YR	
25. DATE OF BIRTH		26. DATE OF GRADE		27. DATE OF LEI							
MO DA YR		MO DA YR		MO DA YR							
2 05 27		19 03 17		58 09 16							
28. NTE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA		32. CORRECTION/CANCELLATION DATA		33. SECURITY REG NO	
MO DA YR		CODE		CODE		DATA CODE		TYPE		MO DA YR	
2 07 16		1. CSC		CODE		DATA CODE		1. EOD DATA		MO DA YR	
2. FICA		2. NONE								27630	
3. NONE										M1	
35. VET. PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. CAREER CATEGORY		39. FED/HEALTH INSURANCE		40. SOCIAL SECURITY NO	
CODE		MO DA YR		MO DA YR		CODE		CODE		CODE	
0		07 16 46		03 17 58		P		1		1	
41. PREVIOUS GOVERNMENT SERVICE DATA		42. LEAVE CAT CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA					
CODE		CODE		FORM EXECUTED CODE		NO TAX EXEMPTIONS		FORM EXECUTED CODE		NO TAX EXEMPTIONS	
0. NO PREVIOUS SERVICE				1. YES				1. YES		1. NO	
1. NO BREAK IN SERVICE				2. NO							
2. BREAK IN SERVICE (LESS THAN 1 YR)				3. NO							
3. BREAK IN SERVICE (MORE THAN 1 YR)				4. NO							
SIGNATURE OR OTHER AUTHENTICATION											
POSTED 15/04/32 JK											

FC&W 1150
11.62

Use Previous
Edition

SECRET 25 APR 1963

44.833

(Wheat Filled In)

SECRET
(When Filled In)

RZR: 25 APR 63

NOTIFICATION OF PERSONNEL ACTION											
1. SERIAL NUMBER		2. NAME (LAST-FIRST MIDDLE)									
027630		HIDALCO B N JR									
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
RESIGNATION				CH 27 63		REGULAR					
6. FUNDS		X	V TO W	V TO CP		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY			
			C TO V	C TO CP		3232 1000 1000					
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION									
DDP/SPECIAL AFFAIRS STAFF FI/CI BRANCH		WASH., D.C.									
11. POSITION TITLE		12. POSITION NUMBER		13. SERVICE DESIGNATION							
OPS OFFICER		0592		D							
14. CLASSIFICATION SCHEDULE (GS, LS, WH)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE					
GS		0136.01		11-4		8940					
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. EMPLOY CODE	21. OFFICE CODING		22. STATION CODE	23. INTEGEE CODE	24. Grade Code	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEE		
45	10	NUMERIC	ALPHABETIC			05	27 12				
28. HIRE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA	31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA	33. SECURITY REQ NO		34. SEN		
				1 - CSC 2 - FICA 3 - NONE	CCOB	TYPE	NO. DA	NO. DA	REQ NO		
35. VET PREFERENCE		36. SERV. COMP. DATE		37. LONG COMP. DATE	38. CAREER CATEGORY	39. FEGL / HEALTH INSURANCE	40. SOCIAL SECURITY NO				
CODE		0 - NONE 1 - BAPT 2 - DRAFT	NO. DA	DA	NO. DA	DA	CCOB	0 - WALTER	HEALTH INS. CODE		
41. PREVIOUS GOVERNMENT SERVICE DATA		42. LEAVE CAT CODE		43. FEDERAL TAX DATA		44. STATE TAX DATA					
CODE		0 - NO PREVIOUS SERVICE 1 - NO GOVERNMENT SERVICE 2 - DRAFT IN SERVICE LESS THAN 3 MONTHS 3 - DRAFT IN SERVICE MORE THAN 3 MONTHS		FORM EXECUTED	CCOB	NO TAX EXEMPTIONS	FORM EXECUTED	CCOB	STATE TAX STATE CODE		
SIGNATURE OR OTHER AUTHENTICATION											
POSTED 10/1/321K											

SECRET
(When Filled In)

ABM: 20 NOV 62

NOTIFICATION OF PERSONNEL ACTION													
1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)											
027630		HICALGO, B N JR											
3. NATURE OF PERSONNEL ACTION				4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT							
REASSIGNMENT				11 20 62		REGULAR							
6. FUNDS		X	V TO V	V TO C		7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY					
			10 TO V	CP TO C		3232 1000 1000		50 USC 403 J					
9. ORGANIZATIONAL DESIGNATIONS						10. LOCATION OF OFFICIAL STATION							
DDP TASK FORCE "W" FI-C1 BRANCH						WASH., D. C.							
11. POSITION TITLE				12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION							
CPS OFFICER				0682		D							
14. CLASSIFICATION SCHEDULE (ISS. LBL. NO.)			15. OCCUPATIONAL SERIES			16. GRADE AND STEP			17. SALARY OR RATE				
GS			0136.01			11 4			8840				
18. REMARKS													
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL													
19. ACTION CODE	20. EMPLOY. CODE	21. OFFICE CODING		22. STATION	23. INTEGRITY	24. RGTGS	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI				
37	10	61300 TFW		75013		1	05 27 19	MO DA YR	MO DA YR				
28. HTE EXPIRES	29. SPECIAL REFERENCE	30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA		33. SECURITY REG NO		34. SEX				
MO DA YR		1 CSC 2 FICA 3 NONE		CODE	TYPE	MO DA YR	EOD DATA						
35. VET. PREFERENCE	36. SERV. COMP. DATE	37. LGRS COMP. DATE	38. CAREER CATEGORY	39. FEGLI / HEALTH INSURANCE		40. SOCIAL SECURITY NO							
CODE	MO DA YR	MO DA YR	CODE	CODE	CODE	0 - WORKER	1 - FEE	CODE					
0 - NONE 1 - DPT 2 - TOT			41. PREVIOUS GOVERNMENT SERVICE DATA	42. LEAVE CAT	43. FEDERAL TAX DATA	44. STATE TAX DATA							
CODE	0 - NO PREVIOUS SERVICE 1 - NO BREAK IN SERVICE 2 - BREAK IN SERVICE (LESS THAN 3 YRS) 3 - BREAK IN SERVICE (MORE THAN 3 YRS)		CODE	24. EXECUTED CODE	45. TAX EXEMPTIONS	46. FORM EXECUTED	CODE	47. NO TAX EXEMPT	STATE CODE				
SIGNATURE OR OTHER AUTHENTICATION													
POSTED <i>12/1/2022</i>													

FORM 462 1150

Use Previous Edition

SECRET

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(When Filled In)

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14-00000

IN ACCORDANCE WITH THE PROVISIONS OF PUBLIC LAW 87 - 793 AND
DCI MEMORANDUM DATED 11 AUGUST 1956, SALARY IS ADJUSTED AS FOLLOWS,
EFFECTIVE 16 OCTOBER 1962.

NAME	SERIAL	DRGN	FUNDS	OLD	OLD	NEW	NEW
				GR	ST	GR	ST
HIDALGO B N JR	027630	64075	V	11	4	11	4
				\$ 8,340	\$ 8,340	\$ 8,840	\$ 8,840

1 Serial No	2 Name	3 Cost Center Number	4 LHOOP Hours
027630	HIDALGO B N JR	64 075 V	1
5 OLD SALARY RATE		6 NEW SALARY RATE	
Grade	Step	Salary	Effective Date
RS 11	3	\$ 8,080	03/19/61
Grade	Step	Salary	Effective Date
S 11	4	\$ 8,340	09/16/62
7 TYPE ACTION			
PM	LSI	ADI	
8 Remarks and Authorization			
<input checked="" type="checkbox"/> NO EXCESS LHOOP <input type="checkbox"/> EXCESS LHOOP <input checked="" type="checkbox"/> IN PAY STATUS AT END OF WAITING PERIOD <input checked="" type="checkbox"/> IN LHOOP STATUS AT END OF WAITING PERIOD			
CLERKS INITIALS <i>JMC</i> AUDITED BY <i>W.L.</i>			
PAY CHANGE NOTIFICATION			

SECRET

(When Filled In)

AES: 17 JAN 62

NOTIFICATION OF PERSONNEL ACTION

OCF

1. SERIAL NUMBER		2. NAME (LAST-FIRST-MIDDLE)		3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT			
027630		HIDALGO B N JR		REASSIGNMENT		01 17 62		REGULAR			
6. FUNDS		V TO V	W TO CF	7. COST CENTER NO CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY					
		OF TO V	CF TO CF	2235 1000 1000		50 USC 403 J					
9. ORGANIZATIONAL DESIGNATIONS		10. LOCATION OF OFFICIAL STATION									
DDP WH PLANS & OPERATIONS STAFF SECTION A		WASH., D.C.									
11. POSITION TITLE		12. POSITION NUMBER		13. CAREER SERVICE DESIGNATION							
OPS OFFICER		0641		D							
14. CLASSIFICATION SCHEDULE (GS, GS, etc.)		15. OCCUPATIONAL SERIES		16. GRADE AND STEP		17. SALARY OR RATE					
GS		0136.01		11 3		8080					
18. REMARKS											
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL											
19. ACTION CODE	20. Employer Code	21. OFFICE CODING		22. STATION CODE	23. INTECREF CODE	24. Hours Code	25. DATE OF BIRTH	26. DATE OF GRADE	27. DATE OF LEI		
37	10	64075 WH		75013	1	05	27 19				
28. ETE EXPIRES		29. SPECIAL REFERENCE		30. RETIREMENT DATA		31. SEPARATION DATA CODE	32. CORRECTION/CANCELLATION DATA		33. SECURITY REG. NO	34. SER	
NO 04 10				CODE		TYPE	NO 04 10	EOD DATA			
35. VET PREFERENCE		36. SERV COMP DATE		37. LONG COMP DATE		38. MIL SERV CREDIT/LCD	39. FEDERAL HEALTH INSURANCE		40. SOCIAL SECURITY NO		
CODE		0 - NONE		W 04 10		W 04 10	0 - MAJOR	1 - HEALTH INV. CODE			
41. PREVIOUS GOVERNMENT SERVICE DATA		42. LEAVE CAT		43. FEDERAL TAX DATA		44. STATE TAX DATA					
CODE		0 - NO PREVIOUS SERVICE		CODE		40 - REGULAR	41 - STATE	42 - NO TAX EXEMPTION		43 - STATE CODE	
		1 - NO BREAK IN SERVICE				1 - YES	1 - YES	1 - NO TAX EXEMPT			
		2 - BREAK IN SERVICE LESS THAN 12 MOS				2 - NO	2 - NO	2 - NO			
		3 - BREAK IN SERVICE 12 MOS									
SIGNATURE OR OTHER AUTHENTICATION											
1/18/62 Jm											

SECRET
When Filled In

ARE: 18 AUG 1961

OCF

NOTIFICATION OF PERSONNEL ACTION

1. SERIAL NUMBER		2. NAME (LAST FIRST MIDDLE)		3. NATURE OF PERSONNEL ACTION		4. EFFECTIVE DATE		5. CATEGORY OF EMPLOYMENT					
027630		HIDALGO B N JR		REASSIGNMENT AND TRANSFER TO VOUCHERED FUNDS		08 20 61		REGULAR					
6. FUNDS		V TO V	V TO CP	7. COST CENTER NO. CHARGEABLE		8. CSC OR OTHER LEGAL AUTHORITY							
X		0 TO V	CP TO 0	2635 5000 8021		50 USC 403 J							
9. ORGANIZATIONAL DESIGNATIONS				10. LOCATION OF OFFICIAL STATION									
DOP WH BRANCH 4 FI CI SECTION				WASH., D. C.									
11. POSITION TITLE				12. POSITION NUMBER	13. CARRIER/ SERVICE DESIGNATION								
OPS OFFICER				0681	D								
14. CLASSIFICATION/EXTRA/SECURITY				15. GRADE AND STEP	16. SALARY OR RATE								
GS				0136.01	11 3	8060							
17. REMARKS													
SPACE BELOW FOR EXCLUSIVE USE OF THE OFFICE OF PERSONNEL													
18. ACTION		19. OFFICE CODING		20. STATION		21. INTECREE		22. DATE OF BIRTH		23. DATE OF HIRED		24. DATE OF LEI	
CODE		CODE		CODE		CODE		CODE		CODE		CODE	
16 10		64450 WH		75013		1		05 27 19					
25. RATE EXPIRES		26. SPECIAL REFERENCE		27. RETIREMENT DATE		28. SEPARATION DATA CODE		29. CORRECTION/CANCELLATION DATA		30. SECURITY		31. SEA	
NO DA		CODE		CODE		TYPE		NO DA		REQ NO		CODE	
1		1		1		1		1		1		1	
32. VET PREFERENCE		33. SERV. COMP. DATE		34. LONG COMP. DATE		35. MIL. SERV. CREDIT/LED		36. FELT / HEALTH INSURANCE		37. SOCIAL SECURITY NO			
CODE		NO DA		NO DA		NO DA		NO DA		NO DA			
1		1		1		1		1		1			
38. PREVIOUS GOVERNMENT SERVICE DATA		39. LEAVE CAT		40. FEDERAL TAX DATA		41. STATE TAX DATA							
CODE		CODE		CODE		CODE		CODE		CODE		CODE	
1. NO PREVIOUS SERVICE		2. NO DATES IN SERVICE		3. DATES IN SERVICE (LESS THAN 12 mos.)		4. DATES IN SERVICE (MORE THAN 12 mos.)		5. NO TAX EXEMPTIONS		6. TAX EXEMPTIONS		7. NO TAX EXEMPT	
1		1		1		1		1		2		1	
SIGNATURE OR OTHER AUTHENTICATION										18 AUG 1961			
CPT H. A. WK										18 AUG 1961			

SECRET
(When Filled In)

1. Serial No.	2. Name	3. Cost Center Number	4. LWOP Hours								
577690	HIDALCO R N JR	DDP/WH 3A UV									
5. OLD SALARY RATE		6. NEW SALARY RATE		7. TYPE ACTION							
Grade	Step	Salary	Last Eff. Date	Grade	Step	Salary	Effective Date	PSI	LSI	ADZ	
25	11	2	7,820	09/20/59	11	3	8,030	03/19/61			
8. Remarks and Authentication											
<p>NO EXCESS LWOP</p> <p>IN PAY STATUS AT END OF WAITING PERIOD</p> <p>IN LWOP STATUS AT END OF WAITING PERIOD</p> <p>EO EO EO EO EO EO 21K</p> <p>PAY CHANGE NOTIFICATION</p>											

Form 743 560

Obsolete Previous
Edition**SECRET**

6-60

L-1

4549

SECRET
(When filled in)

NOTIFICATION OF PERSONNEL ACTION

ADPR 09/21/64

1. NAME, NUMBER 2. DATES-BASE (09/20/64)

027630 MICALUGO R N JR

3. NATURE OF PERSONNEL ACTION

CONV. TO CAREER EMPLOYEE STATUS

4. FUNDS	<input checked="" type="checkbox"/> 1 10 V	<input type="checkbox"/> 1 10 G
	<input type="checkbox"/> 0 10 V	<input type="checkbox"/> 0 10 U

5. DECISION/DETERMINATION

DDP/SAS

6. EFFECTIVE DATE

00 00 00

03 17 61

7. COST CENTER TO CHARGEABLE

4232 1990 1000

8. BY OR OTHER LEGAL AUTHORITY

10. LOCATION OF OFFICIAL STATION

11. POSITION TITLE

12. POSITION NUMBER

13. CAREER STATUS DESIGNATION

D

14. CLASSIFICATION NUMBER (10-10-1)

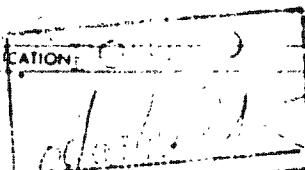
15. OCCUPATIONAL SERIES

16. GRADE AND STEP

17. SALARY OR RATE

18. REMARKS

SIGNATURE OR OTHER AUTHENTICATION



14-00000

IN ACCORDANCE WITH THE PROVISIONS OF P. L. 86-368 AND DCI MEMO DATED
1 AUGUST 1966, SALARY IS ADJUSTED AS FOLLOWS EFFECTIVE 10 JULY 1966.

SD	NAME	SERIAL	ORGN	GR-ST	OLD SALARY	NEW SALARY
O	HIDALGO B N JR	527630	46 17	GS-11 2	\$ 7,270	\$ 7,820

7/57 EMMETT D. ECHOLS
DIRECTOR OF PERSONNEL

SECRET

AES: 24 JUNE 1960 NOTIFICATION OF PERSONNEL ACTION

1. Serial No.	2. Name (Last-First-Middle)	3. Date Of Birth	4. Var. Prof.	5. Sex	6. CS. F.O.O	
527630	HIALOO B N JR	Mo. 05 Day 27 Yr. 19 50-0 15-2	Code 19-1	M 1	03 07 58	
7. SCD	8. CSC Points	9. CSC Or Other Legal Authority	10. Appnt. Authority	11. F.O.O.U	12. I.C.D	13. CSC Points
Mo. 07 Ds. 16 Yr. 46	No. 1 Code 1	50 USCA 403 J	Mo. 03 Day 17 Yr. 50-0 15-2	Code 03	07 58	No. 2 Code 2

PREVIOUS ASSIGNMENT

14. Organizational Designations		Code	15. Location Of Official Station		Station Code
DOS OTR OPERATIONS SCHOOL COVERT TRAINING		1172	WASH., D. C.		15013
16. Dept.	Field	17. Position Title	18. Position No.	19. Serv	20. Occup. Series
Dept - 1	Code	INSTRUCTOR OPERS	1014	63	1711.50
USMIL - 3					
From - 5	3				
21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade	25. PSS Date	26. Activation Number
112	\$ 7270	11	Mo. Da. Yr.	Mo. Da. Yr.	9 7850 30 018
			03 17 56	02 20 59	

ACTION

27. Nature Of Action	Code	28. Eff. Date	29. Type Of Employee	Code	30. Separation Date
REASSIGNMENT	57	09 29 60	REGULAR	Q1	

PRESENT ASSIGNMENT

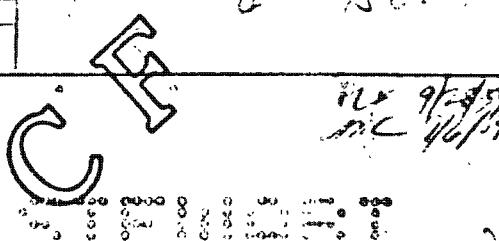
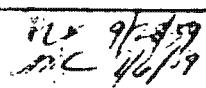
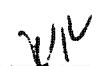
31. Organizational Combinations		Code	32. Location Of Central Station		Station Code	
DDP WH BRANCH 4		4617	WASH. D.C.		75013	
33. Date Field	34. Position Title	35. Person No.		36. Serv. 37. Occup. Series		
15-14-3 12-14-5	Code 1 OPNS OFFICER	0626		00	0136.01	
38. Grade A Step		39. Payroll Or Rate	40. SD	41. Payroll Grade	42. PSL	43. Appropriation Number
11 2		\$ 7270	D	Mo 02 17 55	Mo 03 19 55	0135 1000 1000

સા. સાંગ વિષા

FCRV 40 1150a
1 MAY 27

~~SECRET~~

SECRET
WHEN FILLED IN

1. EMP. SERIAL NO.	2. NAME			3. ASSIGNED GRADE			4. FLS/23 5. ALLOCATED			
527630	HIDALGO B H JK			DOS/THNG 21			UV			
6. OLD SALARY RATE			7. NEW SALARY RATE							
GRADE	STEP	SALARY	LAST EFFECTIVE DATE	GRADE	STEP	SALARY	EFFECTIVE DATE			
GS 11	1	\$ 7,030 U3	17 56	GS 11	2	\$ 7,270	09	20	59	
TO BE COMPLETED BY THE OFFICE OF THE COMPTROLLER										
8. CHECK ONE <input checked="" type="checkbox"/> NO PAYROLL WOP <input type="checkbox"/> PAYROLL WOP			9. NUMBER OF HOURS LWOP							
10. PAY STATUS AT END OF PAYING PERIOD <input type="checkbox"/> IN PAY STATUS <input checked="" type="checkbox"/> OUT OF PAY STATUS			11. INITIALS OF CLERK							
12. TO BE COMPLETED BY THE OFFICE OF PERSONNEL										
13. PROJECTED SALARY RATE AND EFFECTIVE DATE			14. REMARKS							
GRADE	STEP	SALARY	W	2A	7B	4 756				
15. AUTHENTICATION										
   PERIODIC STEP INCREASE - AUTHENTICATION										

FEB 1979 5600

SECRET

PERSONNEL FOLDER

SECRET

JEC:12 JUNE 59

NOTIFICATION OF PERSONNEL ACTION

1. Serial No.	2. Name (Last-First-Middle)	3. Date Of Birth	4. Vet. Prof	5. Soc. Sec. No.	6. CSC-ESF
527630	HIDALGO B N JR	Mo. 05 Da. 27 Yr. 19	None-0 Code 5 Pt-1	M 1	Mo. 03 Da. 17 Yr. 50
7. SCD	8. CSC Recd:	9. CSC Or. Other Legal Authority	10. Army. Altitude	11. FEGLI	12. LCD
Mo. 07 Da. 16 Yr. 46	Yes - 1 Code No - 2	50 USCA 403(d)	Mo. 03 Da. 17 Yr. 50	Yes - 1 Code No - 2	Yes - 1 Code No - 2

PREVIOUS ASSIGNMENT

14. Organizational Designations		Code	15. Location Of Official Station	Station Code
DDP WH BRANCH 1P1 CENTRAL AMERICA SECTION		4613	WASH., D.C.	75013
16. Dept. Field	17. Position Title		18. Position No.	19. Serv. 20. Occup. Series
Dept - 1 Wind - 3 Frgn - 5	Code - 1 Code - 2 Code - 1	AREA OPS OF	0486	GS 0136.01
21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade	25. PFI Dpo
11 1	\$ 7030	D	Mo. 03 Da. 17 Yr. 50	Mo. 09 Da. 20 Yr. 50
				126. Appropriation Number
				8 3500 20

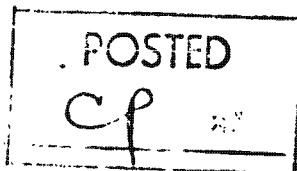
ACTION

97. Nature Of Action	Code	98. Ent. Date	99. Type Of Employee	Code	100. Separation Date
REASSIGNMENT TRANSFER TO CONFIDENTIAL FUNDS	05	Mo. 06 Da. 14 Yr. 50	REGULAR	01	

PRESENT ASSIGNMENT

31. Organizational Designations		Code	32. Location Of Official Station	Station Code
DDP OTR OPERATIONS SCHOOL COVERT TRAINING		1172	WASH., D.C.	75013
33. Dept. Field	34. Position Title		35. Position No.	36. Serv. 37. Occup. Series
Dept - 1 Wind - 3 Frgn - 5	Code - 3	INSTRUCTOR SPERS	1914	IS 1711.50
38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade	42. PFI Dpo
11 1	\$ 7030	D	Mo. 03 Da. 17 Yr. 50	Mo. 07 Da. 15 Yr. 50
				43. Appropriation Number
				9 7500 20 018

44. Remarks



S E C R E T

GENERAL SCHEDULE SALARY INCREASE RETROACTIVELY EFFECTIVE

12 JANUARY 1958 AUTHORIZED BY P. L. 85 - 452 AND DCI

DIRECTIVE. SALARY AS OF 15 JUNE 1958 ADJUSTED AS FOLLOWS

NAME	SERIAL	GRADE-STEP	OLD SALARY	NEW SALARY
HIDALGO R N JR	127630	GS-11-1	\$ 4,700	\$ 7,030

GORDON M. STEWART
/S/ DIRECTOR OF PERSONNEL

S E C R E T

SECRET

(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

VL 16 MAY 58

1. Serial No.	2. Name (Last-First-Middle)	3. Date Of Birth	4. Vet. Prof.	5. Sex	6. CS. EOD
127630	BALMES N. HIDALGO, JR.	Mo. Da. Yr.	None-0 Code 5 Pt-1	Ma. Da. Yr.	Ma. Da. Yr.
	HIDALGO B N JR	05 27 19	10 Pt-2 11	1	03 17 58
7. SCD	8. CSC Retire	9. CSC Or Other Legal Authority	10. Apart Affidav.	11. FECLI	12. LCD
Mo. Da. Yr.	Yes - 1 Code	Mo. Da. Yr.	Yes - 1 Code	Mo. Da. Yr.	Yes - 1 Code
07 16 46	No - 2 1	50 USCA 103.3	103 13 58	No-2 1	103 17 58 FNo - 2 2

PREVIOUS ASSIGNMENT

14. Organizational Designations	Code	15. Location Of Official Station	Station Code
16. Dept. - Field	17. Position Title	18. Position No.	19. Serv. & 20. Occup. Series
Dept - 8 Code USMld - 4 Fgn - 6			
21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade 25. PSI Due 26. Appropriation Number
	\$		Mo. Da. Yr. Mo. Da. Yr.

ACTION

27. Nature Of Action	Code	28. Eff. Date	29. Type Of Employee	Code	30. Separation Date
EXCEPTED APPOINTMENT CORRECTION	12	CR 171 58	REGULAR	01	

PRESENT ASSIGNMENT

31. Organizational Designations	Code	32. Location Of Official Station	Station Code		
DDP WH BRANCH 111 CENTRAL AMERICA SECTION	4613	WASH., D.C.	75013		
33. Dept. - Field	34. Position Title	35. Position No.	36. Serv. & 37. Occup. Series		
Dept - 8 Code USMld - 4 Fgn - 6	2 AREA OPS OF	0436	GS 0136.01		
38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade 42. PSI Due 43. Appropriation Number		
11 1	\$ 6300	6	Mo. Da. Yr. Mo. Da. Yr.		
13 17 58 103 22 59					

44. Remarks

*THIS ACTION CORRECTS SF 1150 EFF 17 MAR 58, ITEM #2, THE NAME, WHICH READS BALMES N. HIDALGO TO READ BALMES N. HIDALGO, JR.

SECRET
(When Filled In)

NOTIFICATION OF PERSONNEL ACTION

LVL 17 MAR 58

1. Serial No.	2. Name (Last-First-Middle)			3. Date Of Birth	4. Vet. Prof	5. Sex	6. CS - EOD
127630	BALMES N. HIDALGO			Mo. Da. Yr.	None-O Code	Mo. Da. Yr.	Mo. Da. Yr.
	HIDALGO BALMES N			05 27 19	5 Pt-1 10 Pt-2	1 M 1	03 17 58
7. SCD	8. CSC Permit			9. CSC Or Other Legal Authority	10. Appt. Affidav.	11. FEGLI	12. LCD
Mo. Da. Yr.	Yes - 1	Code	No - 2	1 50 USCA 403 J	Mo. Da. Yr.	Yes - 1	Code
07 16 46	1		1	03 13 55	03 17 53	1	2

PREVIOUS ASSIGNMENT

14. Organizational Designations	Code	15. Location Of Official Station	Station Code		
16. Doct - Field	17. Position Title	18. Position No.	19. Serv.	20. Occup. Series	
Doct - 2 Lifld - 4 Frjn - 3	Code				
21. Grade & Step	22. Salary Or Rate	23. SD	24. Date Of Grade	25. PSI Due	26. Appropriation Number
	\$		Mo. Da. Yr.	Mo. Da. Yr.	

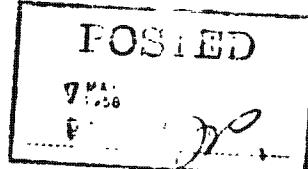
ACTION

27. Nature Of Action	Code	28. Eff. Date	29. Type Of Employee	Code	30. Separation Date
EXCEPTED APPOINTMENT	13	Mo. Da. Yr.	REGULAR	01	

PRESENT ASSIGNMENT

31. Organizational Designations	Code	32. Location Of Official Station	Station Code		
DDP WH BRANCH 111 CENTRAL AMERICA SECTION	4613	WASH., D.C.	75013		
33. Doct - Field	34. Position Title	35. Position No.	36. Serv.	37. Occup. Series	
Doct - 2 Lifld - 4 Frjn - 6	Code	0486	US	0136.01	
38. Grade & Step	39. Salary Or Rate	40. SD	41. Date Of Grade	42. PSI Due	43. Appropriation Number
11 1	\$ 6700	0	03 117 158	03 120 158	8 3500 20

44. Remarks



14-00000

FITNESS RPTS

1966 - 1969

SECRET

(This Form Filled In)

FITNESS REPORT						EMPLOYEE SERIAL NUMBER 027630
SECTION A			GENERAL			
1. NAME (Last) (First) (Middle)	2. DATE OF BIRTH		3. SEX	4. GRADE	5. SD	
HITRACO, RAY G. J. Jr.	27 Aug 1919		M	OP-12	D	
6. OFFICIAL POSITION TITLE Ops Officer	7. OFF/DIV/BR OF ASSIGNMENT DDP/7/0		8. CURRENT STATION Headquarters			
9. CHECK (X) TYPE OF APPOINTMENT <input checked="" type="checkbox"/> CAREER <input type="checkbox"/> RESERVE <input type="checkbox"/> TEMPORARY CAREER-PROVISIONAL (See Instructions - Section C)	10. CHECK (X) TYPE OF REPORT <input checked="" type="checkbox"/> INITIAL <input type="checkbox"/> ANNUAL		11. REASSIGNMENT SUPERVISOR REASSIGNMENT EMPLOYEE			
SPECIAL (Specify):		SPECIAL (Specify):				
12. DATE REPORT DUE IN O.P. 16 March - 31 October 1965			13. REPORTING PERIOD (From to)			
SECTION B PERFORMANCE EVALUATION						
<p>W - Weak: Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate: Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient: Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong: Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding: Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>						
SPECIFIC DUTIES						
<p>List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).</p>						
SPECIFIC DUTY NO. 1 Headquarter desk officer responsible for the support of Miami Station CI/CE activities and operations.						RATING LETTER P
SPECIFIC DUTY NO. 2 Advisor to various components of the WH and WE Divisions on Cuban operations with specific reference to the Cuban Security Intelligence Service, organization, modus operandi and						RATING LETTER S
SPECIFIC DUTY NO. 3 Briefing representatives of foreign liaison services and selected agents visiting in Washington on the Cuban Security and Intelligence Services and his own unique experience in the Communist Party.						RATING LETTER S
SPECIFIC DUTY NO. 4 Translator/interpreter: Served as consultant to WH Division on Cuban Spanish.						RATING LETTER S
SPECIFIC DUTY NO. 5						RATING LETTER
SPECIFIC DUTY NO. 6						RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION						
<p>Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or hobbies, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.</p>						RATING LETTER S
4 JAN 1965						

SECRET

SECTION C		NARRATIVE COMMENTS	
<p>Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B. Provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.</p> <p>Mr. Hidalgo is an able intelligence officer, dedicated to his profession and selfless in his desire to be of service to the Government. Although he has suffered ill health in recent years, he was insistent that he be among the first to be sent to the Dominican Republic when the crisis occurred.</p> <p>An intense person, Mr. Hidalgo is industrious, works well under pressure and sets high standards for his performance. Because he is intent on getting things done, he is occasionally hasty in judgment and in written presentation of the results of his research and conclusions. He is perceptive, quickly accepts suggestions and offers counter-proposals with cogent argument. Mr. Hidalgo was not in a supervisory capacity. He was cost conscious; always endeavoring to be conservative where possible. He is an effective and cooperative member of an office, ready to assume responsibility and to help his colleagues. Thanks to his unique experience on the Cuban target, he has wide knowledge of the Cuban problem and is, in fact, an expert on the Cuban Security and Intelligence Services.</p>			
SECTION D			
CERTIFICATION AND COMMENTS			
1. BY EMPLOYEE			
I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT			
DATE	SIGNATURE OF EMPLOYEE		
9 December 1965	<i>Susan L. Darling</i>		
2. BY SUPERVISOR			
MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION	IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION		
8 months			
DATE	OFFICIAL TITLE OF SUPERVISOR	TYPED OR PRINTED NAME AND SIGNATURE	
9 December 1965	C/WH/C/MO/FI-CI	<i>Susan L. Darling</i>	
3. BY REVIEWING OFFICIAL			
COMMENTS OF REVIEWING OFFICIAL			
<p>I concur with the supervisor's assessment of Mr. Hidalgo with one exception to the statement that Subject works well under pressure. He is indeed an intense person and, under great pressure, his involvement affects his performance; and even more important, it has a very bad effect on his health. With this consideration noted, the undersigned thinks very highly of Mr. Hidalgo and would be pleased to be associated with him again.</p>			
DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE	
9 December 1965	C/WH/C/MO	<i>Walter T. Cini</i>	

SECRET

SECRET

(When Filled In)

FITNESS REPORT					EMPLOYEE SERIAL NUMBER
SECTION A					027630
GENERAL					
1. NAME (Last) HIDALGO, Balmes N.	(First)	(Middle)	2. DATE OF BIRTH 27 May 1919	3. SEX M	4. GRADE 12
5. OFFICIAL POSITION TITLE Ops Officer	7. OFF/DIV/BR OF ASSIGNMENT DDP/SAS			8. CURRENT STATION Washington	
10. CHECK (X) TYPE OF REPORT					
CAREER	RESERVE	TEMPORARY	INITIAL	REASSIGNMENT SUPERVISOR	
CAREER-PROVISIONAL (See instructions - Section C)			XX ANNUAL	REASSIGNMENT EMPLOYEE	
SPECIAL (Specify):			SPECIAL (Specify):		
11. DATE REPORT DUE IN O.P.			12. REPORTING PERIOD (From - To) 9 April 1964-15 March 1965		
SECTION B: PERFORMANCE EVALUATION					
<p>W - Weak Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - Adequate Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - Proficient Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - Strong Performance is characterized by exceptional proficiency.</p> <p>O - Outstanding Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>					
SPECIFIC DUTIES					
<p>List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).</p>					
SPECIFIC DUTY NO. 1 Participated (with other WH/SA/CI officers) in the handling and debriefing of a defected intelligence officer housed in the Headquarters area.					RATING LETTER S
SPECIFIC DUTY NO. 2 Served as Headquarters desk case officer for several counterintelligence operations--prepared cables, dispatches, and memoranda pertaining to these operations.					RATING LETTER P
SPECIFIC DUTY NO. 3 Assisted in translations and preparation of operational documents in Spanish (s/w messages, cover letters, owl messages, etc.).					RATING LETTER S
SPECIFIC DUTY NO. 4 Served as case officer for a counterintelligence operation (the agent was located [redacted]) which included the debriefing, assessing, training, and dispatching of the agent to a denied area (Cuba).					RATING LETTER P
SPECIFIC DUTY NO. 5 [redacted]					RATING LETTER
SPECIFIC DUTY NO. 6 [redacted]					RATING LETTER
OVERALL PERFORMANCE IN CURRENT POSITION					
<p>Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.</p> <p>29 MAR 1965</p>					
					RATING LETTER S

SECRET

SECTION C NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for training. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described if applicable.

Mr. Hidalgo's fluent knowledge of Cuban Spanish, his previous experience in DD/P Cuban operations, and his broad knowledge of Cuba (people, geography, customs, etc.) made him a particularly useful and versatile operations officer during his assignment in the WH/SA counterintelligence operations section. As indicated in Section B, (specific duties) he performed a wide variety of duties.

Mr. Hidalgo approached and performed his assignments with enthusiasm, keenness, dedication, and promptness. He displayed a particular talent for conducting debriefings, and it was in this type activity that he performed best. He also writes well which added to his debriefing capability as well as to his performance as a Headquarters desk operations officer in writing cables, dispatches, memoranda, etc. Mr. Hidalgo is cost conscious and effective in the use of space, equipment and funds. He does not hold a supervisory position.

Mr. Hidalgo performed most of his duties with a minimum of supervision. In a few instances, however, he had a tendency (in his eagerness and desire to get the job done well) to become impatient with the slow and deliberate pace of progress which is sometimes necessary in operational activities. In these few instances, Mr. Hidalgo's work required supervision by a senior operations officer.

SECTION D CERTIFICATION AND COMMENTS

1. BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE : 23 March 65	SIGNATURE OF EMPLOYEE
--------------------	-----------------------

2. BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

11 Months	
-----------	--

DATE : 23 March 1965	OFFICIAL TITLE OF SUPERVISOR	TYPE OR PRINTED NAME AND SIGNATURE
	WH/SA/CI/COPS	Richard Tansing

3. BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Mr. Hidalgo is a sound operations officer with native fluency in Spanish. His impatience is with administrative delays rather than with operational problems which he understands fully and handles well. He has had problems with his health but these largely have been overcome and in the past 9 months have not impeded his operational usefulness. As of the date of this fitness report, he appears fully capable of handling any CI or FI operation assigned to him.

DATE : 23 III 65	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPE OR PRINTED NAME AND SIGNATURE
	C WH/SA CI (WH/C/SP)	Harold F. Swenson

SECRET

SECRET
(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER 027630
SECTION A				
GENERAL				
1. NAME (Last) [REDACTED] (First) [REDACTED] (Middle) [REDACTED]		2. DATE OF BIRTH 27 May 1919	3. SEX Male	4. GRADE GS-11 D
5. OFFICIAL POSITION TITLE OPS OFFICER		7. OFF/DIV/BR OF ASSIGNMENT IDP/S.A.S.	8. CURRENT STATION JMWAVE [REDACTED]	
9. CHECK (X) TYPE OF APPOINTMENT CAREER [REDACTED] RESERVE [REDACTED] TEMPORARY [REDACTED]		10. CHECK (X) TYPE OF REPORT INITIAL [REDACTED] REASSIGNMENT SUPERVISOR [REDACTED]		
CAREER-PROVISIONAL (See Instructions - Section C)		ANNUAL [REDACTED] REASSIGNMENT EMPLOYEE [REDACTED]		
11. DATE REPORT DUE IN O.P.		12. SPECIAL (Specify) Promotion 13. REPORTING PERIOD (From - to) 6 May 1963 to 5 September 1963		
SECTION B PERFORMANCE EVALUATION				
<p>W - <u>Weak</u> Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</p> <p>A - <u>Adequate</u> Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</p> <p>P - <u>Proficient</u> Performance is more than satisfactory. Desired results are being produced in a proficient manner.</p> <p>S - <u>Strong</u> Performance is characterized by exceptional proficiency.</p> <p>O - <u>Outstanding</u> Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</p>				
SPECIFIC DUTIES				
List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (Indicate number of employees supervised).				
SPECIFIC DUTY NO. 1 To effect security screenings of PBRUMEN refugees arriving in the JMWAVE area from PBRUMEN in joint collaboration with ODENVY representatives.				RATING LETTER S
SPECIFIC DUTY NO. 2 To interrogate PBRUMEN security suspects, surfaced by the above screenings and other means, in conjunction with representatives of the KUJUMP interrogation center [REDACTED] [REDACTED]				RATING LETTER S
SPECIFIC DUTY NO. 3 To supervise the interrogation efforts of three KUJUMP interrogators connected with the JMWAVE/KUJUMP KUDESK debriefing program.				RATING LETTER P
SPECIFIC DUTY NO. 4 To prepare and present to his immediate supervisor completed interrogation reports.				RATING LETTER P
SPECIFIC DUTY NO. 5				RATING LETTER [REDACTED]
SPECIFIC DUTY NO. 6 27 SEP 1963				RATING LETTER S
OVERALL PERFORMANCE IN CURRENT POSITION				
Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.				

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in mind the specific relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations if possible. Comment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide best basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

SEP 26 2014
 The person being rated is a conscientious devoted ~~2014~~ ²⁰¹⁴ ~~agent~~ ^{agent} who has demonstrated an extraordinary ability to get along with his co-workers and other ODYOKER representatives with whom he is collaborating. He receives his assignments cheerfully and with enthusiasm and approaches all of his tasks with great zeal. He devotes an inordinate amount of his own personal time to his duties in an effort to achieve perfection and sets very high standards for his own performance. The person being rated speaks native Spanish and is able to accomplish all of his interrogations in Spanish. This ability is a great asset to him in his work and redounds in benefits to the KUDESK effort of the Station.

The person being rated is an accomplished interrogator and thus receives very little guidance in his work. His ability to trap security suspects in contradictions is unique and is paying dividends in the WAVE KUDESK field of endeavor. He has shown mature judgment in the handling of complex security cases, balance in appraising the interrogation results and in recommending disposal action, and proficiency in the preparation of his interrogation reports. He is currently supervising the interrogation activities of three KUJUMP interrogators ~~████████~~ and has shown an ability in establishing personal rapport with these interrogators and proficiency in directing their activities. It is recommended from the standpoint of his career development that after the completion of his current assignment, the person being rated be moved into an assignment involving the handling of agents in the KUDESK field of effort.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

SIGNATURE OF EMPLOYEE

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

4 months

At time preparation this report employee was on TDY
Hqs and leave. Will be shown him upon return.

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

/s/ Neil T. PICKWORTH

4 September 1963

Chief, CI Branch, JMWAVE (signed in pseudo on Fld. Trans.)

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

Subject is a hard working, dedicated, productive intelligence officer who has completely mastered those basic tools of the trade which are needed in CI activities. Subject has and uses native Spanish language fluency. Subject's performance during the period covered by this fitness report warrants an overall evaluation of "Strong." As a result, it is believed that Subject is a well-qualified journeyman who has earned a promotion to the grade of GS-12. Subject is strongly recommended for promotion to the grade of GS-12. Subject has additional growth potential as an intelligence officer. Subject's activities come to the attention of the Reviewing Officer on a bi-weekly basis.

DATE

OFFICIAL TITLE OF REVIEWING OFFICIAL

TYPED OR PRINTED NAME AND SIGNATURE

/s/ Andrew K. REUTEMAN

18 September 1963 Chief of Station, JMWAVE (signed in pseudo on Fld. Trans.)

SECRET

SECRET

(When Filled In)

FITNESS REPORT				EMPLOYEE SERIAL NUMBER										
SECTION A				GENERAL										
1. NAME (Last) (First) (Middle)		2. DATE OF BIRTH	3. SEX	4. GRADE 5. SD										
HIDALGO, BALMES		27 May 1919	M	GS-11 D										
6. OFFICIAL POSITION TITLE		7. OFF/DIV/BRG/OF ASSIGNMENT 8. CURRENT STATION												
Ops Officer		DIP WH P&O SEC A												
9. CHECK (X) TYPE OF APPOINTMENT		10. CHECK (X) TYPE OF REPORT												
CAREER	RESERVE	TEMPORARY	INITIAL	REASSIGNMENT SUPERVISOR										
CAREER-PROVISIONAL (See Instructions - Section C)		<input checked="" type="checkbox"/> ANNUAL		REASSIGNMENT EMPLOYEE										
SPECIAL (Specify):		SPECIAL (Specify):												
11. DATE REPORT DUE IN D.P.		12. REPORTING PERIOD (From to)												
30 October 1962		17 Jan 62 - 30 Sep 62												
SECTION B PERFORMANCE EVALUATION														
<table> <tr> <td>W - Weak</td> <td>Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.</td> </tr> <tr> <td>A - Adequate</td> <td>Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.</td> </tr> <tr> <td>P - Proficient</td> <td>Performance is more than satisfactory. Desired results are being produced in a proficient manner.</td> </tr> <tr> <td>S - Strong</td> <td>Performance is characterized by exceptional proficiency.</td> </tr> <tr> <td>O - Outstanding</td> <td>Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.</td> </tr> </table>					W - Weak	Performance ranges from wholly inadequate to slightly less than satisfactory. A rating in this category requires positive remedial action. The nature of the action could range from counseling, to further training, to placing on probation, to reassignment or to separation. Describe action taken or proposed in Section C.	A - Adequate	Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.	P - Proficient	Performance is more than satisfactory. Desired results are being produced in a proficient manner.	S - Strong	Performance is characterized by exceptional proficiency.	O - Outstanding	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.
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A - Adequate	Performance meets all requirements. It is entirely satisfactory and is characterized neither by deficiency nor excellence.													
P - Proficient	Performance is more than satisfactory. Desired results are being produced in a proficient manner.													
S - Strong	Performance is characterized by exceptional proficiency.													
O - Outstanding	Performance is so exceptional in relation to requirements of the work and in comparison to the performance of others doing similar work as to warrant special recognition.													
SPECIFIC DUTIES														
<p>List up to six of the most important specific duties performed during the rating period. Insert rating letter which best describes the manner in which employee performs EACH specific duty. Consider ONLY effectiveness in performance of that duty. All employees with supervisory responsibilities MUST be rated on their ability to supervise (indicate number of employees supervised).</p>														
SPECIFIC DUTY NO. 1				RATING LETTER										
Responsible for initiation and development of WH Division durable assets program.				P										
SPECIFIC DUTY NO. 2				RATING LETTER										
Collate and maintain files on espionage laws of LA countries.				P										
SPECIFIC DUTY NO. 3				RATING LETTER										
Served as interpreter and translator for Division LA contacts.				P										
SPECIFIC DUTY NO. 4				RATING LETTER										
Coordinated with Branch 1 of WHD on FI and CI matters.				P										
SPECIFIC DUTY NO. 5				RATING LETTER										
Gives lectures as guest instructor to students attending School of International Communism.				S										
SPECIFIC DUTY NO. 6				RATING LETTER										
OVERALL PERFORMANCE IN CURRENT POSITION														
<p>Take into account everything about the employee which influences his effectiveness in his current position such as performance of specific duties, productivity, conduct on job, cooperativeness, pertinent personal traits or habits, and particular limitations or talents. Based on your knowledge of employee's overall performance during the rating period, place the letter in the rating box corresponding to the statement which most accurately reflects his level of performance.</p>														
RATING LETTER				P										

SECRET

(When Filled In)

SECTION C

NARRATIVE COMMENTS

Indicate significant strengths or weaknesses demonstrated in current position keeping in proper perspective their relationship to overall performance. State suggestions made for improvement of work performance. Give recommendations for housing, assignment on foreign language competence, if required for current position. Amplify or explain ratings given in Section B to provide basis for determining future personnel action. Manner of performance of managerial or supervisory duties must be described, if applicable.

Mr. Hidalgo joined WH/PO/A in November 1961 and took up those responsibilities listed above. However, Mr. Hidalgo's performance of duties was interrupted on two occasions by serious illness, 9-27 March and 15 April-31 May 1962. He was twice hospitalized. From 25 June-9 August 1962, Mr. Hidalgo was on TDY for WH/3 as escort officer for Latin American trainees. Although beset by health and other personal problems, Mr. Hidalgo seized upon each new assignment with his customary energy. He proved particularly adept in working as interpreter and escort officer for Latin American trainees, and demonstrated high interest and proven competence in counterintelligence work. His excellent memory and quick perception were distinct assets in these undertakings.

It is recommended, however, that Mr. Hidalgo's next assignment not carry responsibility for submission of finished papers or staff studies, but be one entailing duties commensurate with his ability to work effectively with indigenous personnel and to pursue CI leads through records investigation.

SECTION D

CERTIFICATION AND COMMENTS

1.

BY EMPLOYEE

I CERTIFY THAT I HAVE SEEN SECTIONS A, B, AND C OF THIS REPORT

DATE

SIGNATURE OF EMPLOYEE

2.

BY SUPERVISOR

MONTHS EMPLOYEE HAS BEEN
UNDER MY SUPERVISION

IF THIS REPORT HAS NOT BEEN SHOWN TO EMPLOYEE, GIVE EXPLANATION

DATE

OFFICIAL TITLE OF SUPERVISOR

TYPED OR PRINTED NAME AND SIGNATURE

18 September 1962

C/WH/PO/A

3.

BY REVIEWING OFFICIAL

COMMENTS OF REVIEWING OFFICIAL

I have had insufficient personal contact with Subject to make any meaningful comments.

DATE	OFFICIAL TITLE OF REVIEWING OFFICIAL	TYPED OR PRINTED NAME AND SIGNATURE
13 September 1962	C/WH/OPS	

SECRET

S E C R E T
(When Filled In)

CERTIFICATION OF SEPARATING EMPLOYEE	Name (Last-First-Middle)
	H. J. Hedges, Jr.

MEMORANDUM FOR THE RECORD - ATTACH TO OFFICIAL PERSONNEL FOLDER

I hereby acknowledge the receipt of the following forms and/or information concerning my separation from CIA as indicated by check mark:

1. Standard Form 8 (Notice to Federal Employee about Unemployment Compensation).
2. Standard Form 55 (Notice of Conversion Privilege, Federal Employees' Group Life Insurance). *N/A*
3. Standard Form 56 (Agency Certification of Insurance Status, Federal Employers' Group Life Insurance Act of 1954).
4. Standard Form 2802 (Application for Refund of Retirement Deductions). *Medical Deductible*
5. Form 2595 (Authorization for Disposition of Paychecks). *No Change*
6. Applicable to returnee (resignee from overseas assignment).
I have been advised of my right to have a medical examination before my separation from this Agency and of the importance of such a medical check to my health and well-being.
 Appointment arranged with Office of Medical Services.
 Appointment for Office of Medical Services examination declined.
7. I have been informed of "conflict of interests" policy of the Agency and foresee no problem in this regard concerning my new employment.
8. Form 71 (Application for Leave).
9. CSC Pamphlet 51 (Re-employment Rights of Federal Employees Performing Armed Forces Duty).
10. Instructions for returning to duty from Extended Leave or Active Military Service.

Signature of Employee <i>H. J. Hedges</i>	Date Signed <i>Feb 27, 1970</i>
Address (Street, City, State, Zip Code) 403 SILVER ROCK RD Parkville MD 20851	Correspondence <input checked="" type="checkbox"/> Overt <input type="checkbox"/> Covert
IR 40 VARIATION HIGHGRO X6646	SECRET

SECRET

**ELECTION, DECLINATION, OR WAIVER
OF LIFE INSURANCE COVERAGE
FEDERAL EMPLOYEES GROUP LIFE INSURANCE PROGRAM**

**IMPORTANT
AGENCY INSTRUCTIONS
ON BACK OF ORIGINAL**

TO COMPLETE THIS FORM—

1 FOLLOW THESE GENERAL INSTRUCTIONS:

- Read the back of the "Duplicate" carefully before you fill in the form.
- Fill in **BOTH COPIES** of the form. Type or use ink.
- Do not detach any part.

2

FILL IN THE IDENTIFYING INFORMATION BELOW (please print or type):

NAME (last) HEDALOU JrBalme	(first) Nieves	(middle)	DATE OF BIRTH (month, day, year) May 27 1919	SOCIAL SECURITY NUMBER
Employee Serial Number 27630			LOCATION (City, State, ZIP Code)	
EMPLOYING DEPARTMENT OR AGENCY				

3

MARK AN "X" IN ONE OF THE BOXES BELOW (do NOT mark more than one):

Mark here —
if you
WANT BOTH
optional and
regular
insurance

(A)

ELECTION OF OPTIONAL (IN ADDITION TO REGULAR) INSURANCE

I elect the \$10,000 additional optional insurance and authorize the required deductions from my salary, compensation, or annuity to pay the full cost of the optional insurance. This optional insurance is in addition to my regular insurance.

Mark here —
if you
DO NOT WANT
OPTIONAL but
do want
regular
insurance

(B)

DECLINATION OF OPTIONAL (BUT NOT REGULAR) INSURANCE

I decline the \$10,000 additional optional insurance. I understand that I cannot elect optional insurance until at least 1 year after the effective date of this declination and unless at the time I apply for it I am under age 50 and present satisfactory medical evidence of insurability. I understand also that my regular insurance is not affected by this declination of additional optional insurance.

Mark here —
if you
WANT NEITHER
regular nor
optional
insurance

(C)

WAIVER OF LIFE INSURANCE COVERAGE

I desire not to be insured and I waive coverage under the Federal Employees Group Life Insurance Program. I understand that I cannot cancel this waiver and obtain regular insurance until at least 1 year after the effective date of this waiver and unless at the time I apply for insurance I am under age 50 and present satisfactory medical evidence of insurability. I understand also that I cannot now or later have the \$10,000 additional optional insurance unless I have the regular insurance.

4

**SIGN AND DATE IF YOU MARKED BOX "A" OR "C",
COMPLETE THE "STATISTICAL STUB." THEN RETURN
THE ENTIRE FORM TO YOUR EMPLOYING OFFICE.**

SIGNATURE (do not print)

DATE

13 February 1963

FOR EMPLOYING OFFICE USE ONLY

(official receiving date stamp)

OFFICE OF PERSONNEL
88-39-P-30-02-02-03

See Table of Effective Dates on back of Original

ORIGINAL COPY—Retain in Official Personnel Folder

SECRET

STANDARD FORM NO. 170-2
JAN. 1954
(For use only until April 14, 1968)
170-101

STANDARD FORM 61
REVISED MARCH 1938
U. S. CIVIL SERVICE COMMISSION
F. P. M. CHAPTER 48

APPOINTMENT AFFIDAVITS

IMPORTANT.—Before swearing to these appointment affidavits, you should read and understand the attached information for appointee.

CENTRAL INTELLIGENCE AGENCY

WASHINGTON, D.C.

(Department or agency)

(Bhāskara or Bhāskarī)

(Place of employment)

I, BALMES HIDALGO JR., do solemnly swear (or affirm) that—

A. OATH OF OFFICE

I will support and defend the Constitution of the United States against all enemies, foreign and domestic; that I will bear true faith and allegiance to the same; that I take this obligation freely without any mental reservation or purpose of evasion; that I will well and faithfully discharge the duties of the office on which I am about to enter, SO HELP ME GOD.

B. AFFIDAVIT AS TO SUBVERSIVE ACTIVITY AND AFFILIATION

I am not a Communist or Fascist. I do not advocate nor am I knowingly a member of any organization that advocates the overthrow of the constitutional form of the Government of the United States, or which seeks by force or violence to deny other persons their rights under the Constitution of the United States. I do further swear (or affirm) that I will not so advocate, nor will I knowingly become a member of such organization during the period that I am an employee of the Federal Government or any agency thereof.

C. AFFIDAVIT AS TO STRIKING AGAINST THE FEDERAL GOVERNMENT

I am not participating in any strike against the Government of the United States or any agency thereof, and I will not so participate while an employee of the Government of the United States or any agency thereof. I do not and will not assert the right to strike against the Government of the United States or any agency thereof while an employee of the Government of the United States or any agency thereof. I do further swear (or affirm) that I am not knowingly a member of an organization of Government employees that asserts the right to strike against the Government of the United States or any agency thereof and I will not, while an employee of the Government of the United States or any agency thereof, knowingly become a member of such an organization.

D. AFFIDAVIT AS TO PURCHASE AND SALE OF OFFICE

I have not, nor has anyone acting in my behalf, given, transferred, promised or paid any consideration for or in expectation or hope of receiving assistance in securing such appointment.

E. AFFIDAVIT AS TO DECLARATION OF APPOINTEE

The answers given in the Declaration of Appointee on the reverse of this form are true and correct.

..... 17 Mar 58

Specifying of actions

Subscribed and sworn before me this 13th day of March A. D. 1958

at Washington, D.C.

1894

D.C. 1

Betty A. Bresler 5 Dec 18 1912
(Signature of officer)
Appointment Clerk

NOTE.—If the oath is taken before a Notary Public the date of expiration of his commission should be shown.

DECLARATION OF APPOINTEE

This form is to be completed before you assume duty. Answer all questions. Admitted unfavorable information about such matters as arrests or discharges will be considered together with the favorable information in your record in determining your present fitness for Federal employment. However, a false statement or dishonest answer to any question may be grounds for dismissal after appointment and is punishable by law.

8. PRESENT ADDRESS (street and number, city and State)
1613 16th Street, N.W. - Washington, D. C.

8 (a) DATE OF BIRTH 27 May 1899 (b) PLACE OF BIRTH (city and State, or city and territory or country) Madras (India)

8. (A) IN CASE OF EMERGENCY, PLEASE NOTIFY (B) RELATIONSHIP (C) STREET AND NUMBER, CITY AND STATE (D) TELEPHONE NO.

640-2446 wife 640-2446

6. DOES THE UNITED STATES GOVERNMENT EMPLOY, IN A CIVILIAN CAPACITY, ANY RELATIVE OF YOURS (EITHER BY BLOOD OR MARRIAGE) WITH WHOM YOU LIVE OR HAVE LIVED WITHIN THE PAST 24 MONTHS? YES NO

See, for each such relative, fill in the blank below. If additional space is necessary, complete under Item 12.					
NAME	POST OFFICE ADDRESS (Give street number, if any)	(1) RELATIVE (2) TEMPORARY OR NOT (3) DEPARTMENT OR AGENCY IN WHICH EMPLOYED	RELATIONSHIP	MAR- RIED (Check one)	SIN- GLE (Check one)
		1.			
		2.			
		3.			
		4.			
		5.			
		6.			

INDICATE ANSWER BY PLACING "X" IN PROPER COLUMN		YES	NO	INDICATE ANSWER BY PLACING "X" IN PROPER COLUMN	YES	NO	
8. (A) ARE YOU A CITIZEN OF THE UNITED STATES OF AMERICA, OR (B) AS A NATIVE OF AMERICAN SAMOA, DO YOU OWE ALLEGIANCE TO THE UNITED STATES OF AMERICA?		<input checked="" type="checkbox"/>		10. (A) HAVE YOU EVER FILED A WAIVER OF LIFE INSURANCE COVERAGE UNDER THE FEDERAL EMPLOYEES GROUP LIFE INSURANCE ACT?		<input type="checkbox"/>	
9. ARE YOU AN OFFICIAL OR EMPLOYEE OF ANY STATE, TERRITORY, COUNTY, OR MUNICIPALITY?		<input checked="" type="checkbox"/>		(B) IF YOU HAVE FILED SUCH A WAIVER, HAS IT BEEN CANCELED OR REVOKED?		<input type="checkbox"/>	
If your answer is "Yes," give details in Item 12.				11. SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT: A. HAVE YOU BEEN DISCHARGED FROM EMPLOYMENT BECAUSE: (1) YOUR CONDUCT WAS NOT SATISFACTORY? (2) YOUR WORK WAS NOT SATISFACTORY?		<input type="checkbox"/>	
2. DO YOU RECEIVE OR HAVE YOU APPLIED FOR AN INBOND FROM THE UNITED STATES OR COLUMBIA GOVERNMENT, UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICES?		<input checked="" type="checkbox"/>		B. HAVE YOU BEEN DISCHARGED AFTER OFFICIAL NOTIFICATION THAT: (1) YOUR CONDUCT WAS NOT SATISFACTORY? (2) YOUR WORK WAS NOT SATISFACTORY?		<input type="checkbox"/>	
If your answer is "Yes," give details in Item 12.				C. HAVE YOU BEEN DISCHARGED FROM THE ARMED SERVICES UNDER OTHER THAN HONORABLE CONDITIONS?		<input type="checkbox"/>	
6. SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT, HAVE YOU BEEN ARRESTED, CHARGED, OR HELD BY FEDERAL, STATE, OR OTHER LAW ENFORCEMENT AUTHORITIES, FOR ANY VIOLATION OF ANY FEDERAL, STATE OR LOCAL LAW, OR VIOLATION OF THE NAME, DO NOT INCLUDE TRAFFIC VIOLATIONS FOR WHICH A FINE OF \$50 OR LESS WAS IMPOSED. ALL OTHER CHARGES MUST BE INCLUDED EVEN IF THEY WERE DISMISSED.		<input checked="" type="checkbox"/>		If your answer to A, B, or C is "Yes," give details in Item 12 exactly as you can remember, including the name and address of employer, approximate date, and reasons in each case.		<input type="checkbox"/>	
If your answer is "Yes," give details in Item 12 for each case. (1) approximate date, (2) charge, (3) place, (4) action taken							
8. SINCE YOU FILED APPLICATION RESULTING IN THIS APPOINTMENT, HAVE YOU BEEN BANNED BY THE U.S. CIVIL SERVICE COMMISSION FROM TAKING EXAMINATIONS OR ACCEPTING CIVIL SERVICE APPOINTMENTS?		<input checked="" type="checkbox"/>					
If your answer is "Yes," give dates of and reasons for such disbarment in Item 12.							

INSTRUCTIONS TO APPOINTING OFFICER.—You must determine that this appointment would be in conformance with the Civil Service Act, applicable Civil Service Rules and Regulations, and acts of Congress pertaining to appointment.

This form should be checked for holding of office, pension, any record of recent discharge or arrest, age, citizenship, and members of family. Also, to establish the identity of the appointee, you should particularly check (1) his signature and handwriting against the application and/or other pertinent papers and (2) his physical appearance against the medical certificate.

SECRET
(Former Edition Replaced)

16

QUALIFICATIONS UPDATE

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS

Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information, however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 444, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 5E-13 Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form or your initiative.

SECTION I		BIOGRAPHIC AND POSITION DATA					
EMP. SER. NO.	NAME (Last-First-Middle)					DATE OF BIRTH	
027630	Hidalgo, Balmes N. Jr.					05/27/19	
SECTION II EDUCATION							
HIGH SCHOOL		ADDRESS (City State Country)		YEARS ATTENDED (From To)		GRADUATE	
LAST HIGH SCHOOL ATTENDED La Salle Academy		NYC NY		1938-1940		<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
COLLEGE OR UNIVERSITY STUDY							
NAME AND LOCATION OF COLLEGE OR UNIVERSITY		SUBJECT	YEARS ATTENDED	DEGREE	YEAR RECEIVED	NO. SEM/GRAD HRS. (Specify)	
NY University		Comm Law INT-ESP	1943-45	NO			
UNIV of MD		Fire engineering	1968	No Credit Course			
Mont Jr College		Real Estate Procedures	1968	No Credit Course			

IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.

TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS	
Suburban Hospital		Emergency Room procedures		EXAMINER	1968	3(?)	
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS	
Non-Com leadership school				194?		?	

SECTION III MARITAL STATUS							
1. PRESENT STATUS (Single, Married, Separated, Divorced, Annulled, Bereaved) SPECIFY. MARRIED							
2. NAME OF SPOUSE		(First)	(Middle)	(Last)	(Middle)	(Last)	(Maiden)
		HIDALGO	Veronica	Waylonis		Waylonis	
3. DATE OF BIRTH		4. PLACE OF BIRTH (City State Country)					
23 May 14		DuBois, Pa, USA					
5. OCCUPATION		6. PRESENT EMPLOYER					
Admin Asst		CIA					
7. CITIZENSHIP		8. FORMER CITIZENSHIP/PIST COUNTRY/IES				9. DATE U.S. CITIZENSHIP ACQUIRED	
US		N/A				Birth	

SECTION IV DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE				
NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS
1. <input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE	Daughter	1945 NYC NY	US	Arlington, Va
2. <input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE	Daughter	1950 NYC NY	US	Alexandria Va

FORM 444a
2-68 ADD
Mothe: 1892 SECRET SPAIN US ROCKVILLE MD 16-513
(4) JUN 1968

SECRET

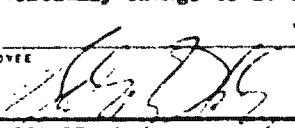
(Confidential)

SECTION V - GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL						
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF ENTRY	PROBLEMS ENCOUNTERED (BY CHECKS)	REASONS FOR TRAVEL	STUDY
Havana, Cuba	Language, customs, people 1919-25			X	X	X
Rep. of Panama	" " "	1952-58	Dec 20	X	X	X
El Salvador, Mexico	" " "	various		X	X	X
Guatemala, Puerto Rico	" " "	various		X	X	X
SECTION VI - TYPING AND STENOGRAPHIC SKILLS						
1. TYPING (WPM) 2. SHORTHAND (WPM)	3. INDICATE SHORTHAND SYSTEM USED - CHECK THE APPROPRIATE ITEM					OTHER SPECIFIC
	<input type="checkbox"/> GREC	<input type="checkbox"/> SPEEDWRITING	<input type="checkbox"/> STENOTYPE			
SECTION VII - SPECIAL QUALIFICATIONS						
PROVIDE INFORMATION ON HOBBIES, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE INVENTED						
Extremely capable in First Aid (advanced) and teaching of same. Firefighting procedures. Elementary knowledge of Real Estate Procedures.						
SECTION VIII - MILITARY SERVICE						
CURRENT DRAFT STATUS						
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?	2. NEW CLASSIFICATION					
<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO N/A					
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS	4. IF DEFERRED, GIVE REASON					
N/A	N/A					
MILITARY RESERVE, NATIONAL GUARD STATUS						
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG		<input type="checkbox"/> ARMY	<input type="checkbox"/> MARINE CORPS	<input type="checkbox"/> COAST GUARD	<input type="checkbox"/> NATIONAL GUARD	<input type="checkbox"/> AIR NATIONAL GUARD
NONE		<input type="checkbox"/> NAVY	<input type="checkbox"/> AIR FORCE			
1. CURRENT RANK, GRADE OR RATE	2. DATE OF APPOINTMENT IN CURRENT RANK	3. EXPIRATION DATE OF CURRENT OBLIGATION				
N/A	N/A	N/A				
4. CHECK CURRENT RESERVE CATEGORY		<input type="checkbox"/> READY RESERVE	<input type="checkbox"/> STANDBY (ARMED)	<input type="checkbox"/> STANDBY (ARMED)	<input type="checkbox"/> RETIRED	<input checked="" type="checkbox"/> DISCHARGED
5. MILITARY MOBILIZATION		6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED				
N/A						
MILITARY SCHOOLS COMPLETED (Excluded Active, Reserve Duty, or as Civilian)						
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		DATE COMPLETED		RESIDENT
Non-COM leadership school		same		????		AGENCY-SPONSORED
SECTION IX - PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS						
NAME AND CHAPTER		ADDRESS (Number, Street, City, State, Country)			DATE OF MEMBERSHIP	
American Red Cross		Silver Spring Md			1964	present
Rockville Fire Dept and OTHERS		(presently Rockville, Md)			1958	present
International Rescue & 1st Aid Assoc		worldwide			1956(?)	present
Montgomery Board of Realtors (ASSOCIATE member)		(Participation Pending)			1958	present
SECTION X - REFERENCES						
I am a bit hazy on the dates.						
DATE	SIGNATURE OF EMPLOYEE					
19 Dec 68	<i>Robert H. H.</i>					

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SECTION V - GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL							
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATES OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY	KNOWLEDGE ACQUIRED BY - CHECK ONE	WORK	STUDY	TRAVEL
Cuba	Area and people/Lan.	1919-1924	Family	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Panama	Area and people/Lan	1952-58	EUROPE 1952-58	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Dom Rep	Area and People/Lan	1965		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Salvador/Quat		1961-2-3		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
SECTION VI & Mexi							
TYPING AND STENOGRAPHIC SKILLS							
1. TYPING (RPM)	2. SHORTHAND (RPM)	3. INDICATE SHORTHAND SYSTEM USED - CHECK ONE APPROPRIATE ITEM					
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> GREGG	<input type="checkbox"/> SPEEDWRITING	<input type="checkbox"/> STENOTYPE	<input type="checkbox"/> OTHER SPECIFY:		
SECTION VII - SPECIAL QUALIFICATIONS							
PROVIDE INFORMATION ON Hobbies, SPORTS, LICENSES, PUBLISHED MATERIALS OR DEVICES WHICH YOU MAY HAVE, INVENTED							
Quite proficient in photography - Safety and Fire engineering - First Aid including the Instruction of First Aid & Hospital Coppeman duties. SOME Real Estate knowledge.							
SECTION VIII - MILITARY SERVICE							
CURRENT DRAFT STATUS							
1. HAS YOUR SELECTIVE SERVICE CLASSIFICATION CHANGED?		2. NEW CLASSIFICATION					
<input type="checkbox"/> YES	<input type="checkbox"/> NO	See age					
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS				4. IF DEFERRED, GIVE REASON			
MILITARY RESERVE, NATIONAL GUARD STATUS							
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG		<input type="checkbox"/> ARMY	<input type="checkbox"/> MARINE CORPS	<input type="checkbox"/> COAST GUARD	<input type="checkbox"/> NATIONAL GUARD		
<input type="checkbox"/> NAVY		<input type="checkbox"/> AIR FORCE	<input type="checkbox"/>	<input type="checkbox"/> AIR NATIONAL GUARD	<input type="checkbox"/>		
1. CURRENT RANK, GRADE OR RATE	2. DATE OF APPOINTMENT IN CURRENT RANK	3. EXPIRATION DATE OF CURRENT OBLIGATION					
N/A	N/A	N/A					
4. CHECK CURRENT RESERVE CATEGORY		<input type="checkbox"/> READY RESERVE	<input type="checkbox"/> STANDBY(MARINE)	<input type="checkbox"/> STANDBY(GUARD)	<input type="checkbox"/> RETIRED	<input checked="" type="checkbox"/> DISCHARGED	
5. MILITARY MOBILIZATION ASSIGNMENT		6. RESERVE UNIT TO WHICH ASSIGNED OR ATTACHED					
N/A		N/A					
MILITARY SCHOOLS COMPLETED (Excluded Active, Reserve Duty, or Civilian)							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		DATE COMPLETED		REMARKS	
Non-Com leadership school		Infantry		1943		N/A	
SECTION IX - PROFESSIONAL SOCIETIES AND OTHER ORGANIZATIONS							
NAME AND CHAPTER		ADDRESS (Number, Street, City, State, Country)				DATE OF MEMBERSHIP	
Rockville Fire Dept & others		Rockville Md & others				FROM	TO
Red Cross as Emergency transport and						1958	present
First-Aid Instructor as well as Md. Corpseman						1964	
Associate member Mgmt Realtors						1968	
Int Assoc Rescuers & First Aid						1964	
SECTION X - REMARKS							
Re Section IV: Both daughters now married.							
Re Section III: This is second marriage.							
Re Real Estate training: This still in active stage. Plans are to supplement my work and eventually change to it on full time basis.							
DATE	SIGNATURE OF EMPLOYEE						
25 Nov 68							

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(Form Filled In)

QUALIFICATIONS UPDATE

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS.

Now that your qualifications are a matter of computer record, they must be periodically updated. This is done automatically for much information; however, some must be obtained directly from you. This form is for that purpose. Section I must be completed in all cases. You need provide other information only if there have been changes since you submitted your Form 4441, "Qualifications Supplement to the Personal History Statement," or a previous update form. If you are in doubt whether information has been previously submitted, enter it in the appropriate section. The signed and dated form should be returned through administrative channels to the File Room, Office of Personnel, Room 5E-13 Headquarters, whether information is added or not. Additionally, a qualifications update may take place at any time there is information to be added or changed simply by completing and returning an update form on your initiative.

SECTION I

BIOGRAPHIC AND POSITION DATA

EMP. SER. NO.	NAME (Last-First-Middle)	DATE OF BIRTH
027630	Hidalgo, Balmes N.	05/27/19

SECTION II

EDUCATION

HIGH SCHOOL

LAST HIGH SCHOOL ATTENDED	ADDRESS (City, State Country)	YEARS ATTENDED (From-To)	GRADUATE
La Salle Academy	NYC City NY	1938-40	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

COLLEGE OR UNIVERSITY STUDY

NAME AND LOCATION OF COLLEGE OR UNIVERSITY	SUBJECT		YEARS ATTENDED FROM - TO -	DEGREE RECEIVED	YEAR RECEIVED	NO. SEM/OTR. HRS. (Specify)
	MAJOR	MINOR				
1. New York University	Comm Law Import-Export	procedures	1943/45	NO		
2.						

IF A GRADUATE DEGREE HAS BEEN NOTED ABOVE WHICH REQUIRED SUBMISSION OF A WRITTEN THESIS, INDICATE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT.

TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS
University of Md. College of Engineering	Fire Service extension	Jan 66	Aug 66	8

OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE

NAME AND ADDRESS OF SCHOOL	STUDY OR SPECIALIZATION	FROM	TO	NO. OF MONTHS
1. Montgomery Junior College Rockville, Md. Campus	Real Estate procedures	Oct 1968		1
2. Suburban Hospital Bethesda, Md	Emergency Medical Aid/ Maryland State Corpman	Jan-May 1968		5

SECTION III

MARITAL STATUS

1. PRESENT STATUS (Single, Married, Separated, Divorced, Annulled, Remarried) SPECIFY:	Married		
2. NAME OF SPOUSE (Last) HIDALGO (First) Veronica (Middle) W. (Maiden) (WAYLONES)			

3. DATE OF BIRTH May 29 1914	4. PLACE OF BIRTH (City, State Country) DuBois, Pa., USA			
-------------------------------------	---	--	--	--

5. OCCUPATION Admin Asst	6. PRESENT EMPLOYER C.I.A.			
---------------------------------	-----------------------------------	--	--	--

7. CITIZENSHIP US	8. FORMER CITIZENSHIP(S) COUNTRY(IES) N/A	9. DATE U.S. CITIZENSHIP ACQUIRED Birth		
--------------------------	--	--	--	--

SECTION IV

DEPENDENT CHILDREN AND DEPENDENTS OTHER THAN SPOUSE

NAME	RELATIONSHIP	DATE AND PLACE OF BIRTH	CITIZENSHIP	PERMANENT ADDRESS
1. <input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE	Daughter	NYC NY - Feb 23/50	US	Alexandria Va
2. <input type="checkbox"/> ADD <input checked="" type="checkbox"/> DELETE	Daughter	NYC NY - Jan 6/45	US	Arlington Va

ALSO FIRST AID INSTRUCTORS Course of one 20-46 hours.

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OFFICIAL USE ONLY Until 0200 hrs

LLC

QUALIFICATIONS SUPPLEMENT TO PERSONAL HISTORY STATEMENT

READ INSTRUCTIONS CAREFULLY BEFORE COMPLETING. TYPE OR PRINT. AVOID USING LIGHT COLORED INKS

SECTION 1		BIOGRAPHIC AND POSITION DATA		
1 EMP. SER. NO.	2 NAME (Last, First, Middle)	3 SEX	4 DATE OF BIRTH	5 SCHEDULE GRADE/STEP
027030	MICALGO B N JR	M	03/27/19	GS-12-04
6 SD	7 POSITION TITLE	8 OFFICE OF ASSIGNMENT	9 LOCATION (Country, City)	
D	CPS OFFICER	W4	WASH., D.C.	
SECTION 2		AGENCY OVERSEAS SERVICE		
AREA	TYPE TOUR	FROM	TO	
WESTERN HEMISPHERE	PCS-VV	57/05/12	57/12/30	
WESTERN HEMISPHERE	TDY-CC	59/01/29	59/02/08	
WESTERN HEMISPHERE	TDY-CC	63/02/01	01/03/01	
WESTERN HEMISPHERE	TDY-CC	61/04/19	61/06/19	
EUROPEAN AREA	TDY-CC	63/12/01	63/12/18	
WESTERN HEMISPHERE	PCS-CC	60/04/31	60/05/01	
WESTERN HEMISPHERE	TDY-CC	63/04/01	64/04/01	
WESTERN HEMISPHERE	TDY-CC	65/12/11	66/12/11	
WESTERN HEMISPHERE	TDY-CC	70: 12/01	71/12/01	
OVERSEAS DATA				
CODED	25 APR 1968			
DATE:	INITIALS:			
SECTION 10		EDUCATION		
DEGREE	MAJOR FIELD	COLLEGE	YEAR	
NO COLLEGE DEGREE ON RECORD				
NONE	Two years - Commercial type IMPERIAL ENGLAND, Brixton	NYU	1943-44	

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When filled in

SECTION III		EDUCATION (Cont'd)					
		HIGH SCHOOL					
LAST HIGH SCHOOL ATTENDED Loy Salle Academy		ADDRESS & CITY STATE COUNTY NYC NY			YEARS ATTENDED	FROM TO	GRADUATE
					1932-40		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
		COLLEGE OR UNIVERSITY STUDY					
NAME AND LOCATION OF COLLEGE OR UNIVERSITY		SUBJECT		YEARS ATTENDED	DEGREE RECEIVED	YEAR RECEIVED	NO SEM / QTR - HRS / SEM/4
		MAJOR	MINOR	FROM TO			
1 NYU - NYC NY		Commerce	Export laws	Sept 43 to ? 45	No		777
2							
3							
4							
3. IF A GRADUATE COURSE HAS BEEN NOTED ABOVE, INDICATE SUBJECT, DATE OF A WRITTEN THESIS AND GIVE THE TITLE OF THE THESIS AND BRIEFLY DESCRIBE ITS CONTENT							
Course, Date, Thesis Title ONEH2E42 DUM							
TRADE, COMMERCIAL AND SPECIALIZED SCHOOLS							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS	
1							
2							
3							
4							
OTHER NON-AGENCY EDUCATION OR TRAINING NOT INDICATED ABOVE							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS	
1							
2							
3							
4							
5. AGENCY SPONSORED EDUCATION							
Specify which, if any, of the education shown in Section III was Agency sponsored							
NAME AND ADDRESS OF SCHOOL		STUDY OR SPECIALIZATION		FROM	TO	NO. OF MONTHS	
1 Full Ops course				During 1958		9	
Management Course				1966 one week			
3							
4							
5							

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SECTION VII		MILITARY SERVICE	
CURRENT DRAFT STATUS			
1. ARE YOU REGISTERED FOR THE DRAFT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		2. SELECTIVE SERVICE CLASSIFICATION ???	
3. LOCAL SELECTIVE SERVICE BOARD NUMBER AND ADDRESS N/A		4. IF DEFERRED, GIVE REASON N/A	
MILITARY SERVICE RECORD (Active Duty Only)			
1. MILITARY ORGANIZATION (Area where on duty)		2. BRANCH OF SERVICE	
Army		Infantry	
3. DATES OF SERVICE		extended active duty	
FROM Oct 1940		TO Sept 1943	
4. STATUS (Regular Reserve or Conscript)		5. RANK GRADE OR RATE OF DISCHARGE, IF NOT ACTIVE	
Federalized National Guard		Cpl.	
6. CHECK TYPE OF SEPARATION HONORABLE DISCHARGE RELEASE TO INACTIVE DUTY RETIREMENT FOR AGE		7. RETIREMENT FOR SERVICE RETIREMENT FOR COMBAT DISABILITY RETIREMENT FOR PHYSICAL DISABILITY	
<input checked="" type="checkbox"/>		<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>	
<input type="checkbox"/>		<input type="checkbox"/>	
8. BRIEF DESCRIPTION OF MILITARY DUTIES (Indicate the duties and the dates when best describe your work or function in the military service)			
Infantryman; Cryptographic sections; driver.			
MILITARY RESERVE, NATIONAL GUARD STATUS			
CHECK RESERVE OR GUARD ORGANIZATION TO WHICH YOU BELONG NGB		ARMY MARINE CORPS COAST GUARD NATIONAL GUARD NAVY AIR FORCE AIR NATIONAL GUARD	
1. CURRENT RANK, GRADE OR RATE		2. DATE OF APPOINTMENT IN CURRENT RANK	
3. EXPIRATION DATE OF CURRENT RESERVE OBLIGATION			
4. CHECK CURRENT RESERVE CATEGORY READY RESERVE STANDBY ACTIVE STANDBY ACTIVE RET RED DISCHARGED			
5. BRIEF DESCRIPTION OF MILITARY RESERVE DUTIES (Indicate the duties and the dates when best describe your work or function in the military service)			
6. IF YOU ARE CURRENTLY ASSIGNED TO A RESERVE OR NATIONAL GUARD TRAINING UNIT, IDENTIFY THE UNIT AND ITS ADDRESS			
MILITARY SCHOOLS COMPLETED (Active Duty, Reserve Status or as Civilian)			
NAME AND ADDRESS OF SCHOOL		SCHOOL SPECIALIZATION	
1.		DATE COMPLETED	
		RECENT CORRESPONDENCE AGENCY SPONSORED	
2.		RECENT CORRESPONDENCE AGENCY SPONSORED	
		RECENT CORRESPONDENCE AGENCY SPONSORED	
3.		RECENT CORRESPONDENCE AGENCY SPONSORED	
		RECENT CORRESPONDENCE AGENCY SPONSORED	
4.		RECENT CORRESPONDENCE AGENCY SPONSORED	
		RECENT CORRESPONDENCE AGENCY SPONSORED	
5.		RECENT CORRESPONDENCE AGENCY SPONSORED	

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(When filled in)

SECTION IV - GEOGRAPHIC AREA KNOWLEDGE AND FOREIGN TRAVEL					KNOWLEDGE ACQUIRED BY - CHECK (X)			
NAME OF REGION OR COUNTRY	TYPE OF SPECIALIZED KNOWLEDGE	DATE OF TRAVEL OR RESIDENCE	DATE & PLACE OF STUDY		RESIDENCE	TELE & SKY	SKY	WORK ASSIST- MENT
Cuba	Longtime Area knowledge	1919-1924	—		X			
Panama	" " "	1952-58			X			X
Puerto Rico	" " "	various			X			X
Guatemala	" " "	various			X			X
El Salvador	" " "	various			X			X
Mexico	" " "	various			X			X
Dom Rep	" Limited area knowledge	1965						X
Germany	" " "	1963						X
Scotland	" " "	1963						X

SECTION V - TYPING AND STENOGRAPHIC SKILLS				
1. TYPING (WPM)	2. SHORTHAND (WPM)	3. INDICATE SHORTHAND SYSTEM USED - CHECK (X) APPROPRIATE ITEM		
40		<input type="checkbox"/> GREGG <input type="checkbox"/> SPEEDWRITING <input type="checkbox"/> STENOTYPE <input type="checkbox"/> OTHER SPECIES		
4. INDICATE OTHER BUSINESS MACHINES WITH WHICH YOU HAVE HAD OPERATING EXPERIENCE OR TRAINING (COMPUTER, STENOGRAF, CARD PUNCH, ETC.)				
Various				

SECTION VI - SPECIAL QUALIFICATIONS				
1. LIST ALL HOBBIES AND SPORTS IN WHICH YOU ARE ACTIVE OR HAVE ACTIVELY PARTICIPATED INDICATE YOUR PROFICIENCY IN EACH				
First Aid Instructor. Very active currently.				
Fire Fighting and safety practices. University of Maryland. Active currently.				
Sky Diving - 10 jumps during 1962. Done once.				
2. FACULTY OR BUSINESS EQUIPMENT OR MACHINES WHICH YOU MAY HAVE LISTED IN ITEM 4. INDICATE LIST ANY SPECIAL SKILLS YOU POSSESS RELATING TO OTHER EQUIPMENT AND MACHINES SUCH AS OPERATION OF RADIO TRANSMITTERS (radio, tv, speed reading & recording, OFFSET PRESS, TURRET LATHE, ETC) AND OTHER SCIENTIFIC & PROFESSIONAL DEVICES				
3. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION SUCH AS PILOT, ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, MEDICAL TECHNICIAN, PSYCHOLOGIST, PHYSICIAN, ETC? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO				
4. IF YOU HAVE ANSWERED 'YES' TO ITEM 3 ABOVE, INDICATE KIND OF LICENSE OR CERTIFICATION AND THE ISSUING STATE, MUNICIPALITY, ETC. (Provide license number if known)				
First Aid Instructor - National Red Cross - 1963				
5. FIRST LICENSE/CERTIFICATE (Year of issue) 1963				
6. LATEST LICENSE/CERTIFICATE (Year of issue)				
7. LIST ANY SIGNIFICANT PUBLISHED MATERIALS OF WHICH YOU ARE THE AUTHOR. DO NOT SUBMIT COPIES UNLESS REQUESTED. INDICATE THE TITLE, PUBLICATION DATE, AND TYPE OF WRITING (non-fiction or scientific articles, general interest, technical, popular, short stories, etc.)				
8. INDICATE ANY DEVICES WHICH YOU HAVE INVENTED AND STATE WHETHER OR NOT THEY ARE PATENTED				
9. PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE				

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SECRET

When filled in

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SECRET
When filled in)

1. PERSONNEL SERIAL NO. (11-6)		2. GRADE		3. L.D. NO.					
3. NAME (17-24)		4. COMPONENT		5. DATE OF BIRTH					
7. LANGUAGE		6. CODE (25-27)		8. DATE OF TEST					
9. TEST PURPOSE		10. ANNIVERSARY DATE (28-33)							
AWARD		TEST SCORES		11. ELIGIBILITY (39)					
SKILL		READING (34)	WRITING (35)	PRONUNCIATION (36)	SPEAKING (37)	UNDERSTANDING (38)	AWARDABLE	NOT AWARDABLE	
14. I CERTIFY THIS EMPLOYEE FOR AWARD						15. TYPE OF AWARD			
SIGNATURE		DATE		A-M	E-I-N	C	R-W-O	D-V	
16. AMOUNT OF AWARD		\$		17. I CERTIFY THAT FUNDS ARE AVAILABLE					
18. FEDERAL TAX DEDUCTION		\$		OBLIGATION REF. NO.		SIGNATURE			
19. STATE/DC TAX DEDUCTION		\$		20. CHARGE ALLOTMENT NO. DATE					
21. NET AMOUNT OF AWARD		\$		22. EMPLOYEE PAYROLL NO. DATE					
23. FORWARD CHECK TO						24. ALLOTMENT OF ASSIGNMENT			
						25. CHECK NO. DATE			

FORM 1272 VIII PREVIOUS EDITIONS

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(10-48) MRD COPY

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(When Filled In)

1. PERSONNEL SERIAL NO. (1-6)		(When Filled In)						
2. LD NO.								
3. NAME (7-24)		LANGUAGE PROFICIENCY AND AWARDS DATA						
4. LANGUAGE		5. COMPONENT		6. GRADE		7. DATE OF BIRTH		
7. LANGUAGE		8. CODE (25-27)		9. DATE OF TEST		10. ANNIVERSARY DATE (28-33)		
11. TEST PURPOSE		TEST SCORES					12. ELIGIBILITY (39)	
AWARD		READING (34)	WRITING (35)	PRONUNCIATION (36)	SPEAKING (37)	UNDERSTANDING (38)	AWARDABLE	
13. SKILL							NOT AWARDABLE	
14. I CERTIFY THIS EMPLOYEE FOR AWARD							15. TYPE OF AWARD	
SIGNATURE		DATE		A-M		C	R-W-S	D-V
16. AMOUNT OF AWARD		\$ 27.00		17. I CERTIFY THAT FUNDS ARE AVAILABLE				
18. FEDERAL TAX DEDUCTION		\$		OBLIGATION REF. NO. SIGNATURE				
19. STATE/DC TAX DEDUCTION		\$		20. CHARGE ALLOTMENT NO. DATE				
21. NET AMOUNT OF AWARD		\$		22. EMPLOYEE PAYROLL NO.				
23. FORWARD CHECK TO							24. ALLOTMENT OF ASSIGNMENT	
							25. CHECK NO. DATE	

**FORM
4-58 1273 USE PREVIOUS EDITIONS**

~~SECRET~~

(IR-63) MRD CGEY

14-00002
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(When Filled In)

11-61 127 630	LANGUAGE DATA RECORD		
PART I-GENERAL			
1. NAME (Last-First-Middle) Hidalgo, Balmes Nieves JR	17-241	2. DATE OF BIRTH May 27 1912	125-201 MOTH DAY YEAR
3. LANGUAGE Spanish 720	4. TODAY'S DATE May	134-131 MOTH DAY YEAR 9 1958	<input type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE
PART II-LANGUAGE ELEMENTS			
SECTION A. Reading (40)			
1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY RARELY.			
2. I CAN READ TEXTS OF MOST GRADES OF DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY OCCASIONALLY.			
3. I CAN READ TEXTS OF AVERAGE DIFFICULTY (NEWSPAPERS, REFERENCE MATERIALS, ETC.), USING THE DICTIONARY FREQUENTLY.			
4. I CAN READ SIMPLE TEXTS, SUCH AS STREET SIGNS, NEWSPAPER HEADLINES, ETC., USING THE DICTIONARY FREQUENTLY.			
5. I HAVE NO READING ABILITY IN THE LANGUAGE.			
SECTION B. Writing (41)			
1. I CAN WRITE PERSONAL LETTERS AND SIMILAR MATERIAL WITH COMPLETE SUCCESS WITHOUT USING THE DICTIONARY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH VERY FEW GRAMMATICAL ERRORS, IN NATIVE STYLE, USING THE DICTIONARY ONLY RARELY.			
2. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL WITH COMPLETE SUCCESS, USING THE DICTIONARY ONLY RARELY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH FEW GRAMMATICAL ERRORS, BUT IN A STYLE WHICH MAY NOT BE NATIVE, USING THE DICTIONARY OCCASIONALLY.			
3. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH OCCASIONAL MINOR GRAMMATICAL ERRORS AND IN OBVIOUSLY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY OCCASIONALLY.			
4. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH MANY GRAMMATICAL ERRORS AND IN A VERY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY FREQUENTLY.			
5. I CANNOT WRITE IN THE LANGUAGE.			
SECTION C. Pronunciation (42)			
1. MY PRONUNCIATION IS NATIVE.			
2. WHILE NATIVES CAN DETECT AN ACCENT IN MY PRONUNCIATION THEY HAVE NO DIFFICULTY UNDERSTANDING ME.			
3. MY PRONUNCIATION IS OBVIOUSLY FOREIGN, BUT ONLY RARELY CAUSES DIFFICULTY FOR NATIVES TO UNDERSTAND.			
4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND.			
5. I HAVE NO SKILL IN PRONUNCIATION.			
CONTINUE ON REVERSE SIDE			

CONTINUATION OF PART II-LANGUAGE ELEMENTS

SECTION D.

Speaking (43)

1. I SPEAK FLUENTLY AND ACCURATELY IN ALL PRACTICAL AND SOCIAL SITUATIONS; I CONVERSE FREELY AND IDIOMATICALLY IN ALL FIELDS WITH WHICH I AM FAMILIAR.

2. I SPEAK FLUENTLY AND ACCURATELY IN NEARLY ALL PRACTICAL AND SOCIAL SITUATIONS; I CAN CONVERSE IN MOST FIELDS WITH WHICH I AM FAMILIAR AND I EMPLOY SOME POPULAR SAYINGS, LITERARY QUOTATIONS, AND COMMON PROVERBS.

3. I GET ALONG QUITE WELL IN SITUATIONS OF DAILY LIFE AND TRAVEL AND CAN CONDUCT ROUTINE BUSINESS IN PARTICULAR FIELDS.

4. I MANAGE TO GET ALONG IN THE MOST COMMON SITUATIONS OF DAILY LIFE AND TRAVEL.

5. I HAVE NO ABILITY TO USE THE LANGUAGE IN ANY OF THE ABOVE RESPECTS.

SECTION E.

Understanding (14)

1. I UNDERSTAND NON-TECHNICAL CONVERSATION ON ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND NEARLY EVERYTHING I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.

2. I UNDERSTAND NON-TECHNICAL CONVERSATION ON NEARLY ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MOST OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES, INCLUDING MOST JOKES AND PUNS.

3. I UNDERSTAND NEARLY ALL CONVERSATION ON TOPICS OF DAILY LIFE AND TRAVEL, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MUCH OF WHAT I HEAR ON THE RADIO, AND AT THE MOVIES, PLAYS, AND LECTURES.

4. I UNDERSTAND THE SIMPLEST CONVERSATION, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND SOME OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.

5. I AM NOT ABLE TO UNDERSTAND THE SPOKEN LANGUAGE.

BEFORE CONTINUING - CHECK PART II TO ENSURE THAT YOU HAVE CIRCLED ONE NUMBER PER SECTION.

PART III-EXPERIENCE AS TRANSLATOR OR INTERPRETER (85)

1. I HAVE HAD EXPERIENCE AS A TRANSLATOR.

2. I HAVE HAD EXPERIENCE AS AN INTERPRETER.

3. BOTH OF THE ABOVE STATEMENTS APPLY.

4. NONE OF THE ABOVE STATEMENTS APPLY.

PART IV-CERTIFICATION

I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS CERTIFICATION CONSTITUTES MY APPLICATION FOR A MAINTENANCE AWARD PROVIDED I AM ELIGIBLE UNDER THE TERMS OF REGULATION NO. 23-115, PAR. 1C(6). I UNDERSTAND THAT I MUST PASS AN OBJECTIVE LANGUAGE PROFICIENCY TEST BEFORE I BECOME ELIGIBLE FOR AN AWARD, AND THAT IRRESPECTIVE OF THE DATE OF TESTING, ANNUAL MAINTENANCE AWARDS WILL BE CUMULATIVE AS OF THE ANNIVERSARY DATE OF COMPLETING THIS FORM.

DATE SIGNED	SIGNATURE
9 May 1958	<i>Palmer, L. Miller</i>
(46)	C
(47)	A

SECRET

(When Filled In)

(1-6)	LANGUAGE DATA RECORD		
127630			
PART I-GENERAL			
1. NAME (Last-First-Middle) (17-24)	2. DATE OF BIRTH (25-30)		
Hidalgo, Balme Nieves JR	MONTH	DAY	YEAR
May	27	19	9
3. LANGUAGE (31-33)	4. TODAY'S DATE (34-38)	5.	
Portuguese 630	May 9 1958	<input type="checkbox"/> I HAVE NO PROFICIENCY IN ANY FOREIGN LANGUAGE	
PART II-LANGUAGE ELEMENTS			
SECTION A. Reading (40)			
1. I CAN READ TEXTS OF ANY DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY ONLY RARELY. 2. I CAN READ TEXTS OF MOST GRADES OF DIFFICULTY, OF A GENERAL NATURE OR IN FIELDS I AM FAMILIAR WITH, USING THE DICTIONARY OCCASIONALLY. 3. I CAN READ TEXTS OF AVERAGE DIFFICULTY (newspapers, reference materials, etc.), USING THE DICTIONARY FREQUENTLY. 4. I CAN READ SIMPLE TEXTS, SUCH AS STREET SIGNS, NEWSPAPER HEADLINES, ETC., USING THE DICTIONARY FREQUENTLY. 5. I HAVE NO READING ABILITY IN THE LANGUAGE.			
SECTION B. Writing (41)			
1. I CAN WRITE PERSONAL LETTERS AND SIMILAR MATERIAL WITH COMPLETE SUCCESS WITHOUT USING THE DICTIONARY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH VERY FEW GRAMMATICAL ERRORS, IN NATIVE STYLE, USING THE DICTIONARY ONLY RARELY. 2. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL WITH COMPLETE SUCCESS, USING THE DICTIONARY ONLY RARELY. I CAN WRITE FACTUAL NARRATIVE AND EXPOSITORY MATERIAL WITH REASONABLE CLARITY, WITH FEW GRAMMATICAL ERRORS, BUT IN A STYLE WHICH MAY NOT BE NATIVE, USING THE DICTIONARY OCCASIONALLY. 3. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH OCCASIONAL MINOR GRAMMATICAL ERRORS AND IN OBVIOUSLY FOREIGN, AWKWARD STYLE, USING THE DICTIONARY OCCASIONALLY. 4. I CAN WRITE PERSONAL LETTERS AND SIMILAR SIMPLE MATERIAL, WITH REASONABLE SUCCESS IN CONVEYING MY MEANING, BUT WITH MANY GRAMMATICAL ERRORS AND IN A VERY FOREIGN, AWKWARD STYLE; USING THE DICTIONARY FREQUENTLY. 5. I CANNOT WRITE IN THE LANGUAGE.			
SECTION C. Pronunciation (42)			
1. MY PRONUNCIATION IS NATIVE. 2. WHILE NATIVES CAN DETECT AN ACCENT IN MY PRONUNCIATION THEY HAVE NO DIFFICULTY UNDERSTANDING ME. 3. MY PRONUNCIATION IS OBVIOUSLY FOREIGN, BUT ONLY RARELY CAUSES DIFFICULTY FOR NATIVES TO UNDERSTAND. 4. MY PRONUNCIATION IS OCCASIONALLY DIFFICULT FOR NATIVES TO UNDERSTAND. 5. I HAVE NO SKILL IN PRONUNCIATION.			
CONTINUE ON REVERSE SIDE			

CONTINUATION OF PART III-LANGUAGE ELEMENTS

SECTION D.

Speaking (43)

1. I SPEAK FLUENTLY AND ACCURATELY IN ALL PRACTICAL AND SOCIAL SITUATIONS; I CONVERSE FREELY AND IDIOMATICALLY IN ALL FIELDS WITH WHICH I AM FAMILIAR.

2. I SPEAK FLUENTLY AND ACCURATELY IN NEARLY ALL PRACTICAL AND SOCIAL SITUATIONS; I CAN CONVERSE IN MOST FIELDS WITH WHICH I AM FAMILIAR AND I EMPLOY SOME POPULAR SAYINGS, LITERARY QUOTATIONS, AND COMMON PROVERBS.

3. I GET ALONG QUITE WELL IN SITUATIONS OF DAILY LIFE AND TRAVEL AND CAN CONDUCT ROUTINE BUSINESS IN PARTICULAR FIELDS.

4. I MANAGE TO GET ALONG IN THE MOST COMMON SITUATIONS OF DAILY LIFE AND TRAVEL.

5. I HAVE NO ABILITY TO USE THE LANGUAGE IN ANY OF THE ABOVE RESPECTS.

SECTION E.

Understanding (44)

1. I UNDERSTAND NON-TECHNICAL CONVERSATION ON ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND NEARLY EVERYTHING I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.

2. I UNDERSTAND NON-TECHNICAL CONVERSATION ON NEARLY ALL SUBJECTS, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MOST OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES, INCLUDING MOST JOKES AND PUNS.

3. I UNDERSTAND NEARLY ALL CONVERSATION ON TOPICS OF DAILY LIFE AND TRAVEL, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND MUCH OF WHAT I HEAR ON THE RADIO, AND AT THE MOVIES, PLAYS, AND LECTURES.

4. I UNDERSTAND THE SIMPLEST CONVERSATION, BOTH FACE-TO-FACE AND ON THE TELEPHONE; I UNDERSTAND SOME OF WHAT I HEAR ON THE RADIO AND AT THE MOVIES, PLAYS, AND LECTURES.

5. I AM NOT ABLE TO UNDERSTAND THE SPOKEN LANGUAGE.

BEFORE CONTINUING - CHECK PART II TO ENSURE THAT YOU HAVE CIRCLED ONE NUMBER PER SECTION.

PART III-EXPERIENCE AS TRANSLATOR OR INTERPRETER (45)

1. I HAVE HAD EXPERIENCE AS A TRANSLATOR.

2. I HAVE HAD EXPERIENCE AS AN INTERPRETER.

3. BOTH OF THE ABOVE STATEMENTS APPLY.

4. NONE OF THE ABOVE STATEMENTS APPLY.

PART IV-CERTIFICATION

I CERTIFY THAT THE INFORMATION GIVEN ABOVE IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS CERTIFICATION CONSTITUTES MY APPLICATION FOR A MAINTENANCE AWARD PROVIDED I AM ELIGIBLE UNDER THE TERMS OF REGULATION NO. 25-115, PAR. (C)(4). I UNDERSTAND THAT I MUST PASS AN OBJECTIVE LANGUAGE PROFICIENCY TEST BEFORE I BECOME ELIGIBLE FOR AN AWARD, AND THAT IRRESPECTIVE OF THE DATE OF TESTING, ANNUAL MAINTENANCE AWARDS WILL BE CUMULATIVE AS OF THE ANNIVERSARY DATE OF COMPLETING THIS FORM.

DATE SIGNED	SIGNATURE
9-May-1958	<i>Salas, B. Toliver</i>
1461	1473

CONFIDENTIAL

SECURITY APPROVAL

DATE : 17 April 1964

YOUR
REFERENCE: 18658 DDP/SAS

CASE NO. : 65077

TO : Director of Personnel

ATTN :

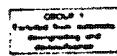
SUBJECT : HIDALGO, Balmes Nieves, Jr.

1. This is to inform you that Subject has been approved for the appointment specified in your request under the provisions of Headquarters Regulations 10-3 and 20-5 including access to classified information through TOP SECRET as required in the performance of duties.
2. Unless arrangements are made within 60 days for entrance on duty within 120 days, this approval becomes invalid.
3. As part of the entrance on duty processing:

 A personal interview in the Office of Security must be arranged. A personal interview is not necessary. Please advise Chief, Clearance Branch, extension 5620 when Subject enters on duty.

4. This is a conversion case.

FOR THE DIRECTOR OF SECURITY:


W. A. Osborne
Chief, Personnel Security Division

CONFIDENTIAL
(When Filled In)

STAFF AGENT CLEARANCE

DATE : 22 April 1963

YOUR REFERENCE: Memorandum of 19 April 1963

CASE NO. : 565077

TO : Chief, Contract Personnel Division

ATTN. : Staff Agents Branch

SUBJECT : [REDACTED] *Heddyje B. N. Jr.*

1. This is to advise that a security clearance is granted for the employment of the Subject as a Staff Agent, OS-11, by DDP/SAS in the capacity of Operations Officer under Project JMWAVE.

2. If your office should desire at a later date to change the status or use of the Subject, a request to cover any proposed change should be submitted to this office.

3. Unless arrangements are made within 60 days for entrance on duty within 120 days, this Approval becomes invalid.

4. As a part of entrance on duty processing:

A personal interview in the Office of Security must be arranged by your office.

A personal interview is not necessary.

W. A. Osborne

W. A. Osborne

COMINT PERSONNEL SECURITY APPROVALS - 65

WMA

CONFIDENTIAL
(WHEN FILLED IN)

SECURITY APPROVAL

DATE : 10 March 1958

**YOUR
REFERENCE:**

CASE NO.: 65077

TO : Director of Personnel
FROM : Director of Security
SUBJECT : HIDALGO, Balmes Nieves

1. This is to inform you of security approval of the subject person as follows:

Subject has been approved for the appointment specified in your request under the provisions of Regulations 10-210 and 20-730 including access to classified information through Top Secret as required in the performance of his duties.

Subject has been approved for appointment under the authority of Paragraph 4(d) of Regulation 10-210, and under Regulation 20-730 including access to classified information through Top Secret as required in the performance of his duties.

2. Unless arrangements are made within 60 days for entrance on duty within 120 days, this approval becomes invalid.

3. As part of the entrance on duty processing:

A personal interview in the Office of Security must be arranged.

A personal interview is not necessary.

This clearance is issued in advance of receipt of a SF-377. Subject will be assigned to the WH Division.

FOR THE DIRECTOR OF SECURITY:

W. M. Knott
W. M. Knott
Chief, Personnel Security Division

~~SECRET~~Biographic Information

Name: Rafael N. HIDALGO, Jr.
Grade: GS-11
Service Designation: SI

Date and Place of Birth: 27 May 1919
Havana, Cuba

Marital Status: Married

Education and Career Outside the Agency: 1943-46 New York University - No degree (2 yrs)
Nov 46-Dec 49 FBI, Eastern part of United States -
Undercover Agent

Languages: Spanish - Fluent
Portuguese & French - Fair

Military Duty: 27 Mar 39-27 Sep 1943 New York National Guard
(Federalized Oct 40) U.S. Army

CIA Experience: 13 Feb 52 Ex Appt., Contract Employee, GS-9, DDP/RH/
HYPOTHESIS, [redacted]
1 Feb 56 Promotion, Contract Employee, GS-11, DDP/RH,
HYPOTHESIS, [redacted]

CIA Training: Covert training

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(This Form is to be filled in)

INSTRUCTIONS: COMPLETION IN DUPLICATE. THE DATA RECORDED ON THIS FORM IS ESSENTIAL IN DETERMINING TRAVEL EXPENSES ALLOWABLE IN CONNECTION WITH LEAVE AT GOVERNMENT EXPENSE, OVERSEAS DUTY, RETURN TO RESIDENCE UPON SEPARATION, AND FOR PROVIDING CURRENT RESIDENCE AND DEPENDENCY INFORMATION REQUIRED IN THE EVENT OF AN EMPLOYEE EMERGENCY. THE ORIGINAL OF THIS FORM WILL BE FILED IN THE EMPLOYEE'S OFFICIAL PERSONNEL FOLDER.

NAME OF EMPLOYEE	(Last)	(First)	(Middle)
HIDALGO JR PALMES NIÑEVES			
1. RESIDENCE DATA			
PLACE OF RESIDENCE WHEN APPOINTED	LAST PLACE OF RESIDENCE IN CONTINENTAL U.S. (If appointed abroad)		
D.C.			
PLACE IN CONTINENTAL U.S. DESIGNATED AS PERMANENT RESIDENCE			
D.C.			
2. MARITAL STATUS			
CHECK (EX. ONE) <input type="checkbox"/> SINGLE <input checked="" type="checkbox"/> MARRIED <input type="checkbox"/> SEPARATED <input type="checkbox"/> DIVORCED <input type="checkbox"/> BIDDEN <input type="checkbox"/> ANNULLED			
IF MARRIED, INDICATE PLACE OF MARRIAGE			DATE OF MARRIAGE
BALMUNI MISS. USA			9 APR 1943
IF DIVORCED, PLACE OF DIVORCE DECREE			DATE OF DECREE
IF BIDDEN, INDICATE PLACE SPOUSE DIED			DATE SPOUSE DIED
IF PREVIOUSLY MARRIED, INDICATE NAME(S) OF SPOUSE, REASON(S) FOR TERMINATION, AND DATE(S)			
3. MEMBERS OF FAMILY			
NAME OF SPOUSE	ADDRESS (No., Street, City, Zone, State)		TELEPHONE NUMBER
LOUISE HIDALGO			
NAME OF CHILDREN	ADDRESS		SEX <input type="checkbox"/> F <input checked="" type="checkbox"/> F AGE 13 8
Luz Maria Frances Rebecca			
NAME OF FATHER (Or male guardian)	ADDRESS		TELEPHONE NUMBER
BALMUNI N HIDALGO			
NAME OF MOTHER (Or female guardian)	ADDRESS		TELEPHONE NUMBER
Rose HIDALGO			
WHAT MEMBER(S) OF YOUR FAMILY HAS BEEN TOLD OF YOUR AFFILIATION WITH THE AGENCY FOR EMERGENCY PURPOSES?			
WIFE			
4. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY			
NAME (Mr., Mrs., Miss) (Last-First-Middle)	RELATIONSHIP		
HIDALGO, LOUISE	WIFE		
HOME ADDRESS (No., Street, City, Zone, State)	HOME TELEPHONE NUMBER		
BUSINESS ADDRESS (No., Street, City, Zone, State) AND NAME OF EMPLOYER, IF APPLICABLE	BUSINESS TELEPHONE & EXTENSION		
IS THE INDIVIDUAL NAMED ABOVE SITTING UP YOUR AGENCY AFFILIATION?			
<input type="checkbox"/> YES <input type="checkbox"/> NO			
IS THIS INDIVIDUAL AUTHORIZED TO MAKE DECISIONS ON YOUR BEHALF?			
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
DOES THIS INDIVIDUAL KNOW THAT HE HAS BEEN DESIGNATED AS YOUR EMERGENCY ADDRESSEE?			
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO			
THE PERSONS NAMED IN ITEM 3 ABOVE MAY ALSO BE NOTIFIED IN CASE OF EMERGENCY. IF SUCH NOTIFICATION IS NOT DESIRABLE BECAUSE OF HEALTH OR OTHER REASONS, PLEASE SO STATE IN ITEM 7 ON THE REVERSE SIDE OF THIS FORM.			
5. VOLUNTARY ENTRIES			
INDICATE ANY BANKING INSTITUTIONS WITH WHICH YOU HAVE ACCOUNTS			
GREENWICH SAVINGS BANK			
CONTINUED ON REVERSE SIDE			
CURRENT RESIDENCE AND DEPENDENCY REPORT			

CONFIDENTIAL
From Filled In

5. (CONTINUED)

(IN WHOM NAME(S) ARE THE ACCOUNTS LISTED?)

SUNNIES N. HIGGINS THE HOUSE WIFE

HAVE YOU COMPLETED A LAST WILL AND TESTAMENT? YES NO. IF "YES", WHERE IS DOCUMENT LOCATED?HAVE YOU EXECUTED A POWER OF ATTORNEY? YES NO. IF "YES", WHO POSSESSES THE POWER OF ATTORNEY?

6. ADDITIONAL DATA AND/OR CONTINUATION OF PRECEDING ITEMS

Do NOT notify other persons in item 3 of
EMERGENCY. UNLESS wife is NOT AVAILABLE.

SIGNED AT	DATE	SIGNATURE
		<i>Edna G. Higgins</i>

CONFIDENTIAL

STANDARD FORM 144
JANUARY 1952
U. S. CIVIL SERVICE COMMISSION
(PNC CHAPTERS LI AND R3)

STATEMENT OF PRIOR FEDERAL AND MILITARY SERVICE

IMPORTANT: The information on this form will be used in determining creditable service for *Leave purposes* and retention credits for *reduction in force*. The employee should complete Part I and the Personnel Office should complete Parts II through IV.

PART I.—EMPLOYEE'S STATEMENT							PART II.—THIS COLUMN IS FOR PERSONNEL OFFICE USE			
1. NAME (Last, first, middle initial)				2. DATE OF BIRTH			9. RETENTION GROUP			
HIDALGO JR, BALMIS NERIES				27 MNY 1819						
3. LIST THE FOLLOWING INFORMATION CONCERNING ALL FEDERAL AND DISTRICT OF COLUMBIA SERVICE YOU HAVE HAD PRIOR TO YOUR PRESENT APPOINTMENT (Do not include military service).							10. CSC STATUS (For permanent employees only)			
NAME AND LOCATION OF AGENCY		FROM—		TO—		TYPE OF APPOINTMENT IF KNOWN		11. SERVICE		
US ARMY DEPT OF Defense QUARTERMASTER Cdo		YEAR	MONTH	DAY	YEAR	MONTH	DAY	YEAR	MONTH	DAY
		51	1	12	RECENT	7	2	6		
4. LIST PERIODS OF SERVICE IN ANY BRANCH OF THE ARMED FORCES OF THE UNITED STATES. IF YOU HAD NO MILITARY SERVICE, WRITE "NONE."							12. TOTAL SERVICE			
BRANCH		FROM—		TO—		DISCHARGE (Hon. or dishon.)		13. NONCREDITABLE SERVICE (Leave purposes only)		
U.S. ARMY INF		YEAR	MONTH	DAY	YEAR	MONTH	DAY	14. NONCREDITABLE SERVICE (RIF purposes only)		
1935 MAR 27 43 SEP 21								4	5	35
5. DURING PERIODS OF EMPLOYMENT SHOWN IN ITEM 3, DID YOU HAVE A TOTAL OF MORE THAN 6 MONTHS ABSENCE WITHOUT PAY, INCLUDING PERIODS OF MERCHANT MARINE SERVICE, DURING ANY ONE CALENDAR YEAR? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO							15. REEMPLOYMENT RIGHTS			
If answer is "Yes," list following information.							<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
TYPE IF KNOWN (LWOP, Furl, Susp, AWOL, Mer Mar)		FROM—		TO—		TOTAL		16. RETENTION RIGHTS		
		YEAR	MONTH	DAY	YEAR	MONTH	DAY	YEARS	MONTHS	DAYS
6. DURING THE FEDERAL SERVICE LISTED IN ITEM 3, DID YOU ACQUIRE A PERMANENT COMPETITIVE CIVIL SERVICE STATUS? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO (If answer is "Yes," in what agency were you employed at the time status was acquired?)							17. EXPIRATION DATE OF RETENTION RIGHTS			
7. ARE YOU: A. THE WIFE OF A DISABLED VETERAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO B. THE MOTHER OF A DECEASED OR DISABLED VETERAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO C. THE UNMARRIED WIDOW OF A VETERAN? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO										
8. TO BE EXECUTED BEFORE A NOTARY PUBLIC OR OTHER PERSONS AUTHORIZED TO ADMINISTER OATHS. I swear (or affirm) that the above statements are true to the best of my knowledge and belief.										
(DATE)		Subscribed and sworn to before me on this 13th day of Mar 1958 at Washington, D.C.					(MONTH)		(CITY)	
S E A L							Betty A Bussard			
NOTE: If oath is taken before a Notary Public, the date of expiration of his Commission should be shown.										

(OVER)

10-6840-4

**PART III.—DETERMINING CREDITABLE SERVICE
AND SERVICE COMPUTATION DATE FOR
LEAVE PURPOSES**

TOTAL SERVICE (Item 12)

NONCREDITABLE SERVICE (Item 13)

CREDITABLE SERVICE (Leave purposes)

ENTRANCE ON DUTY DATE (Present agency)

LESS CREDITABLE SERVICE (Leave purposes)

SERVICE COMPUTATION DATE (Leave purposes)

YEARS	MONTHS	DAYS

58	3	17
11	8	1
46	7	16

**PART IV.—DETERMINING CREDITABLE SERVICE
AND SERVICE COMPUTATION DATE FOR
REDUCTION IN FORCE PURPOSES**

(To be completed only in those cases when the amount of creditable service for reduction in force purposes differs from the amount creditable for leave purposes)

TOTAL SERVICE (Item 12)

NONCREDITABLE SERVICE (Item 14)

CREDITABLE SERVICE (RIF purposes)

ENTRANCE ON DUTY DATE (Present agency)

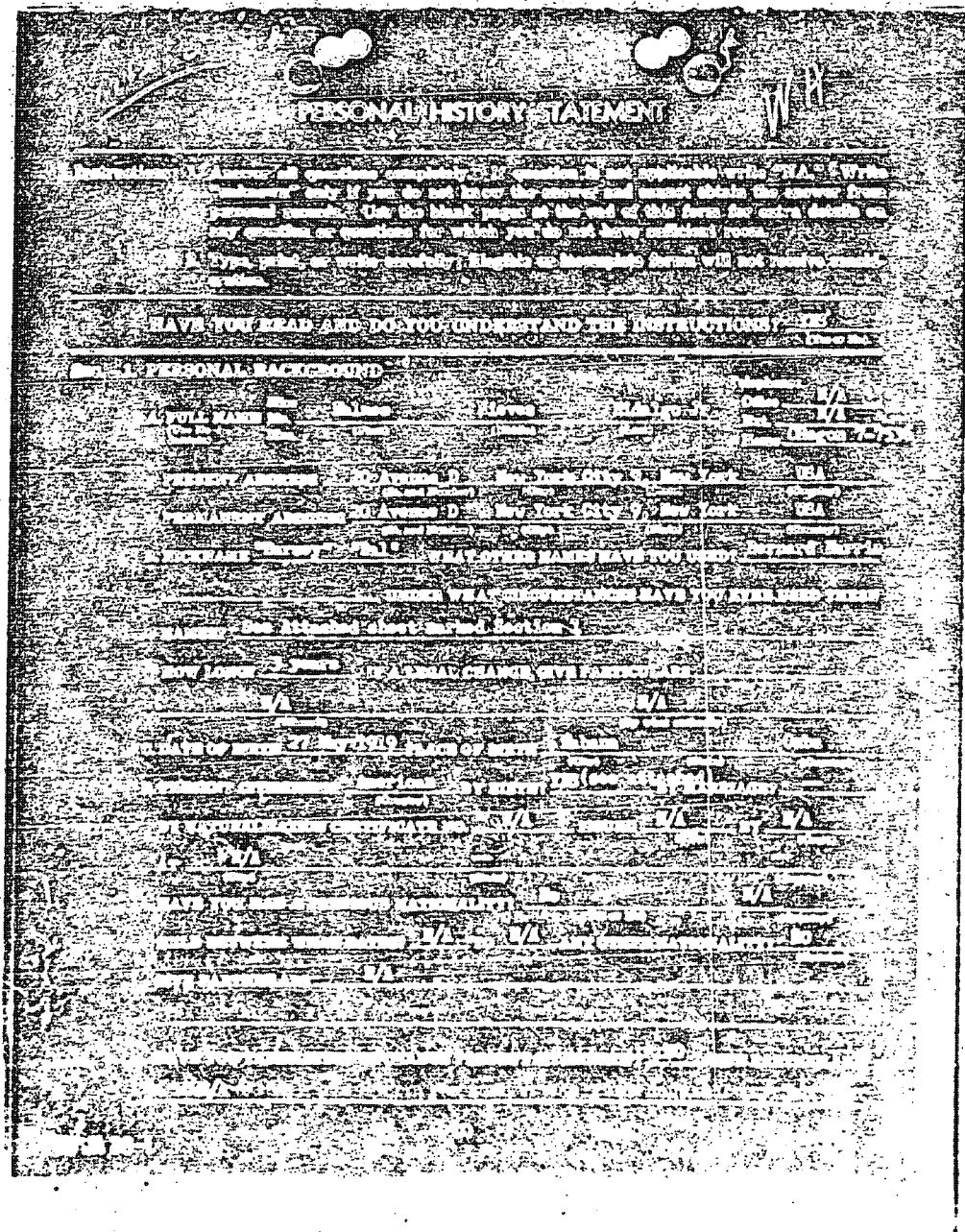
LESS CREDITABLE SERVICE (RIF purposes)

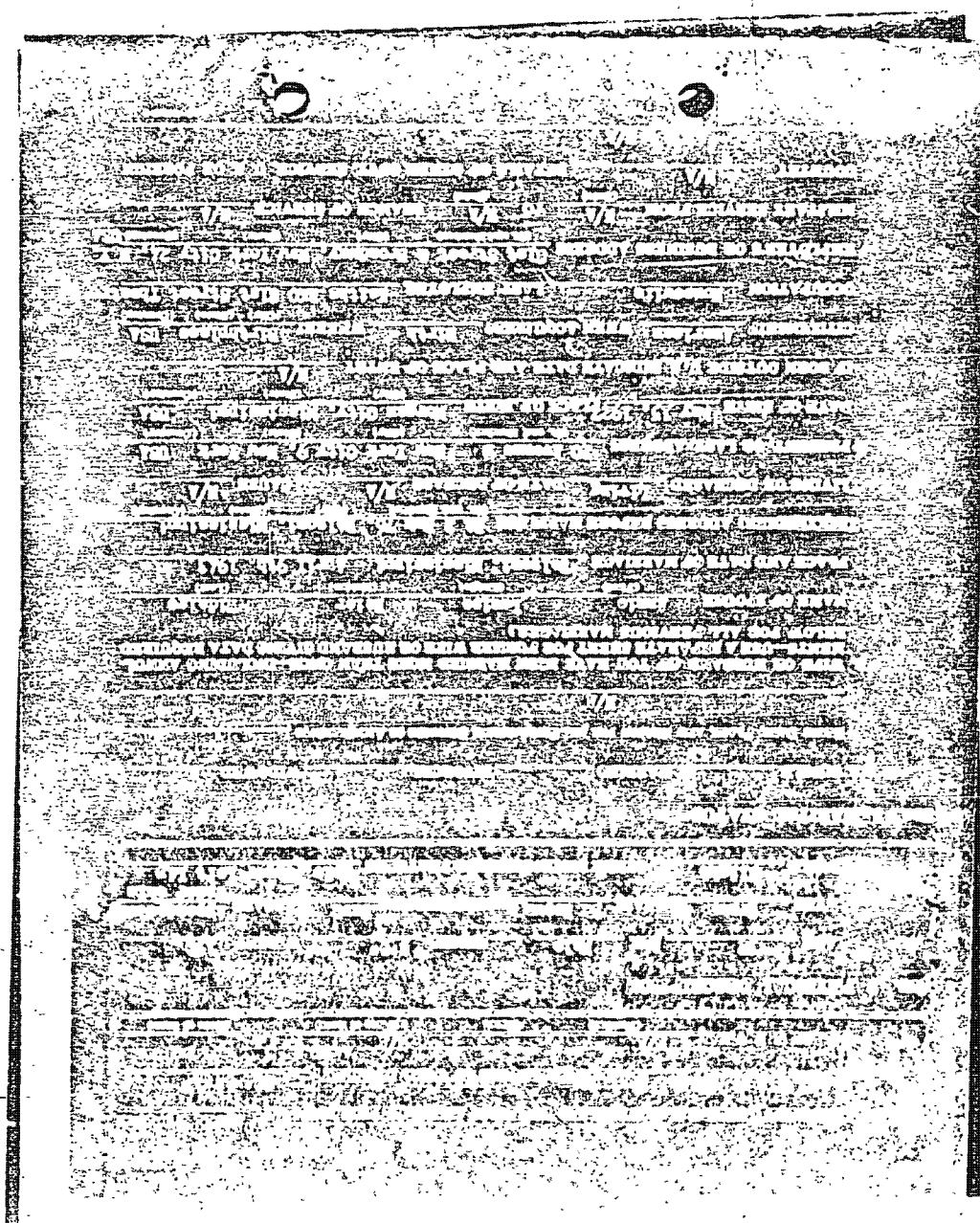
SERVICE COMPUTATION DATE (RIF purposes)

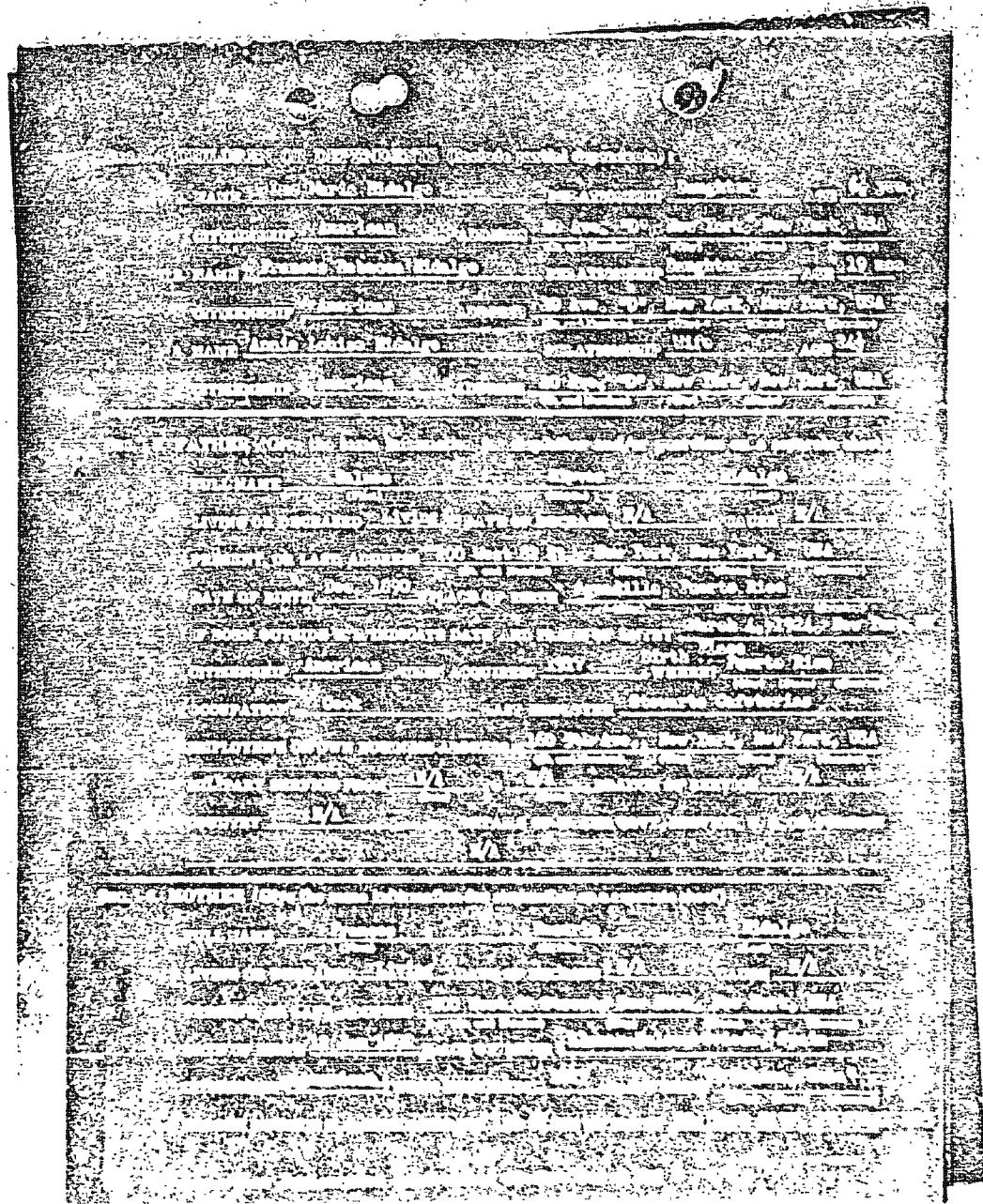
(Enter as the "service computation date" on the employee's "Service Record Card," "SP-7")

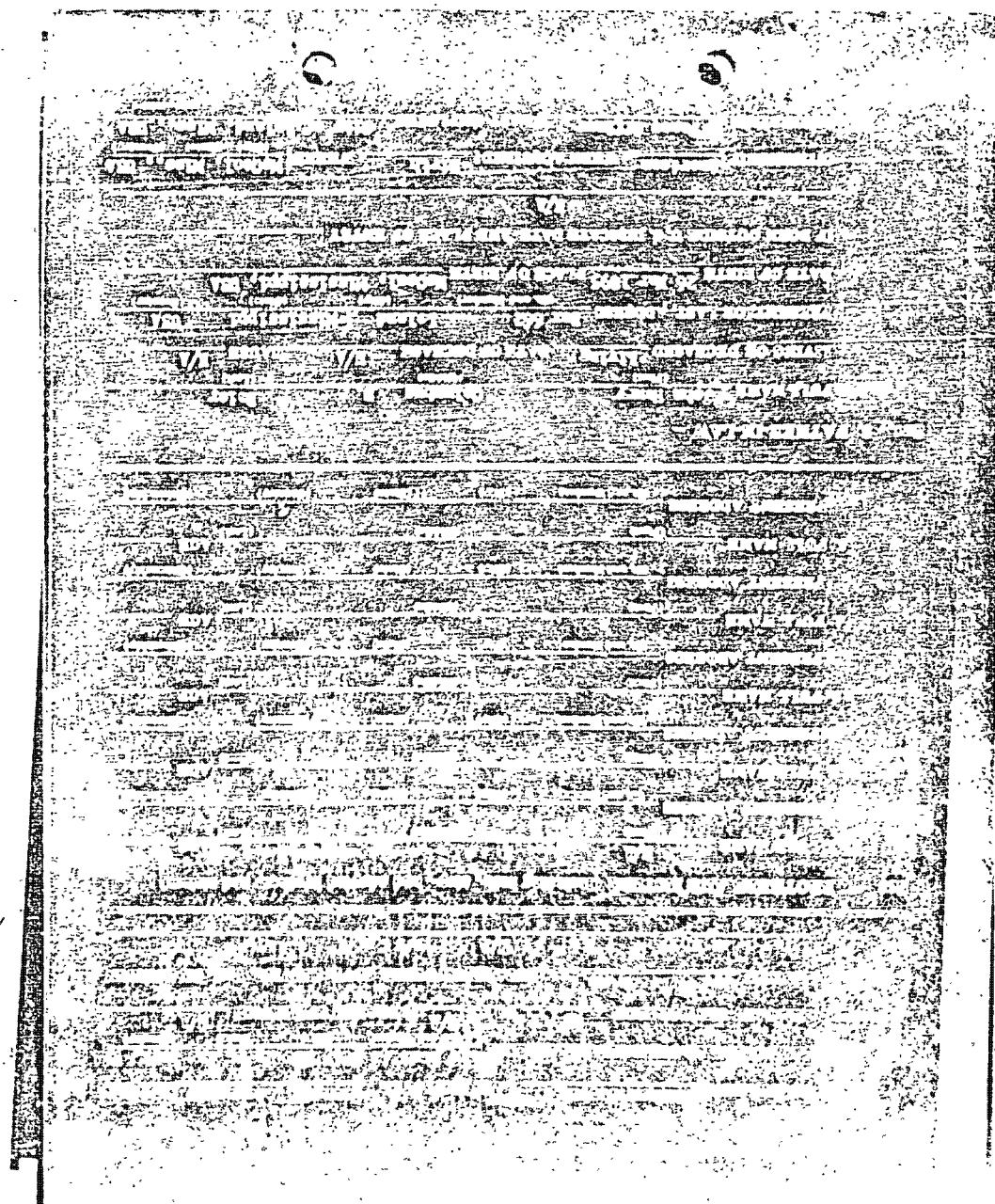
YEARS	MONTHS	DAYS

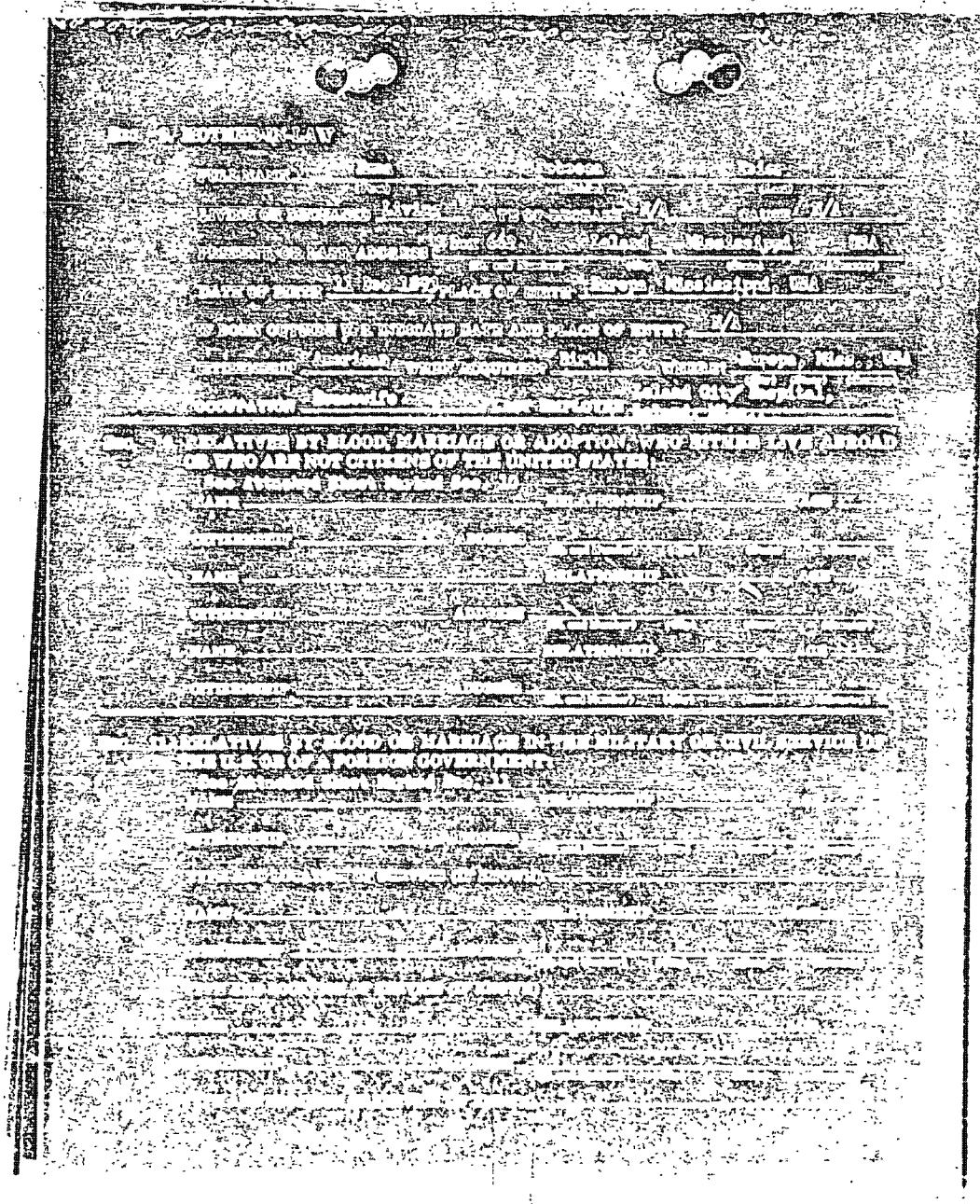
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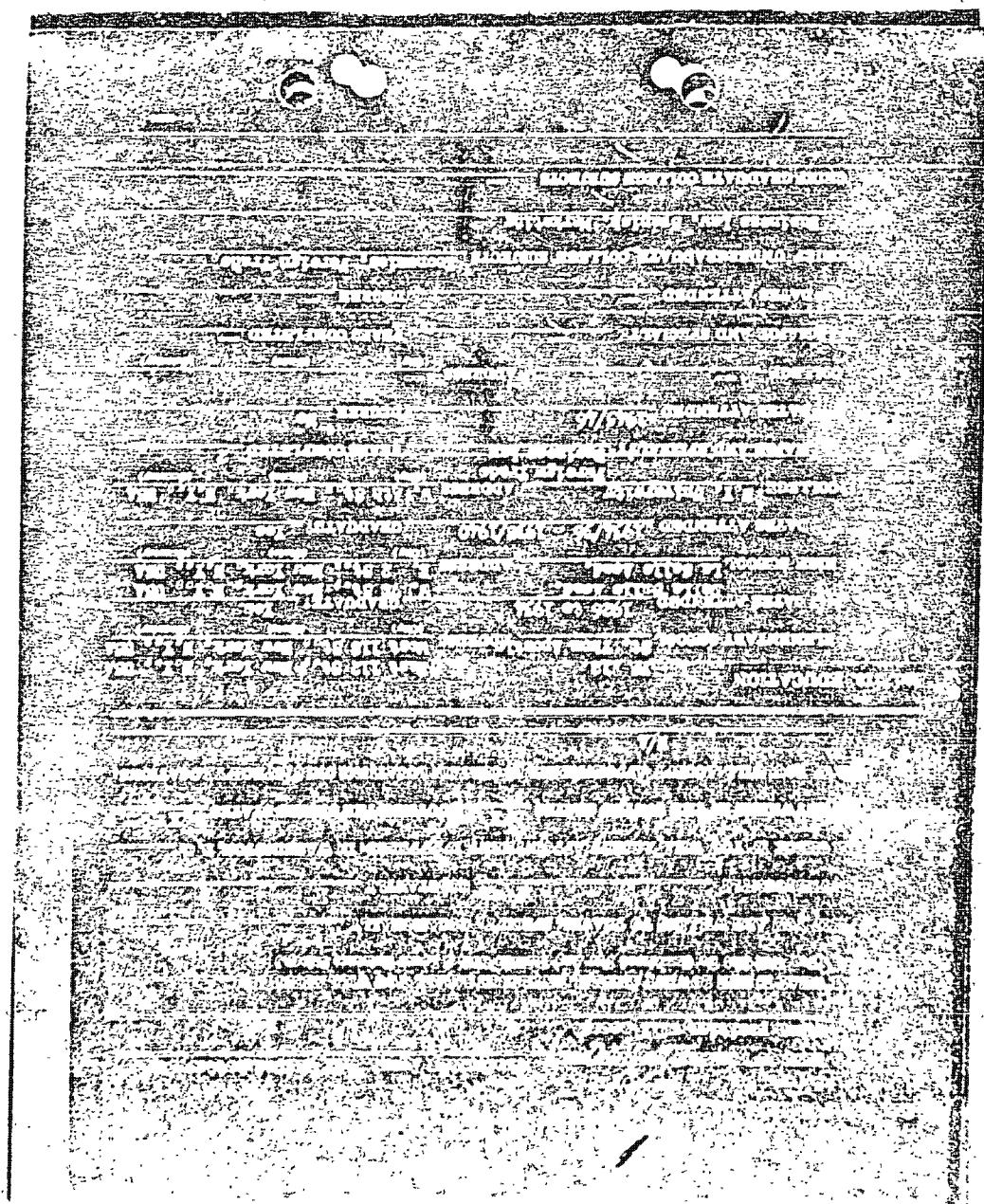




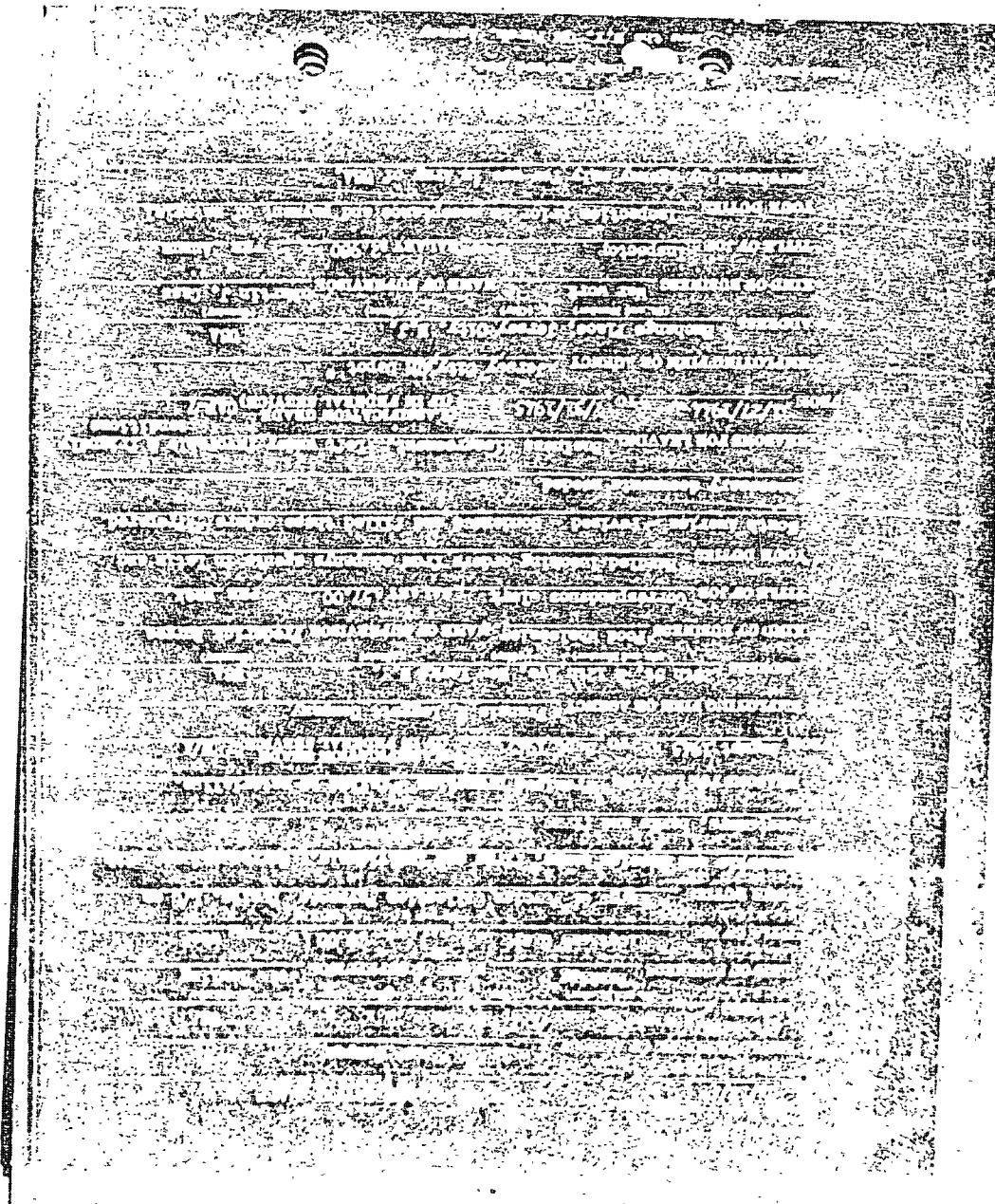


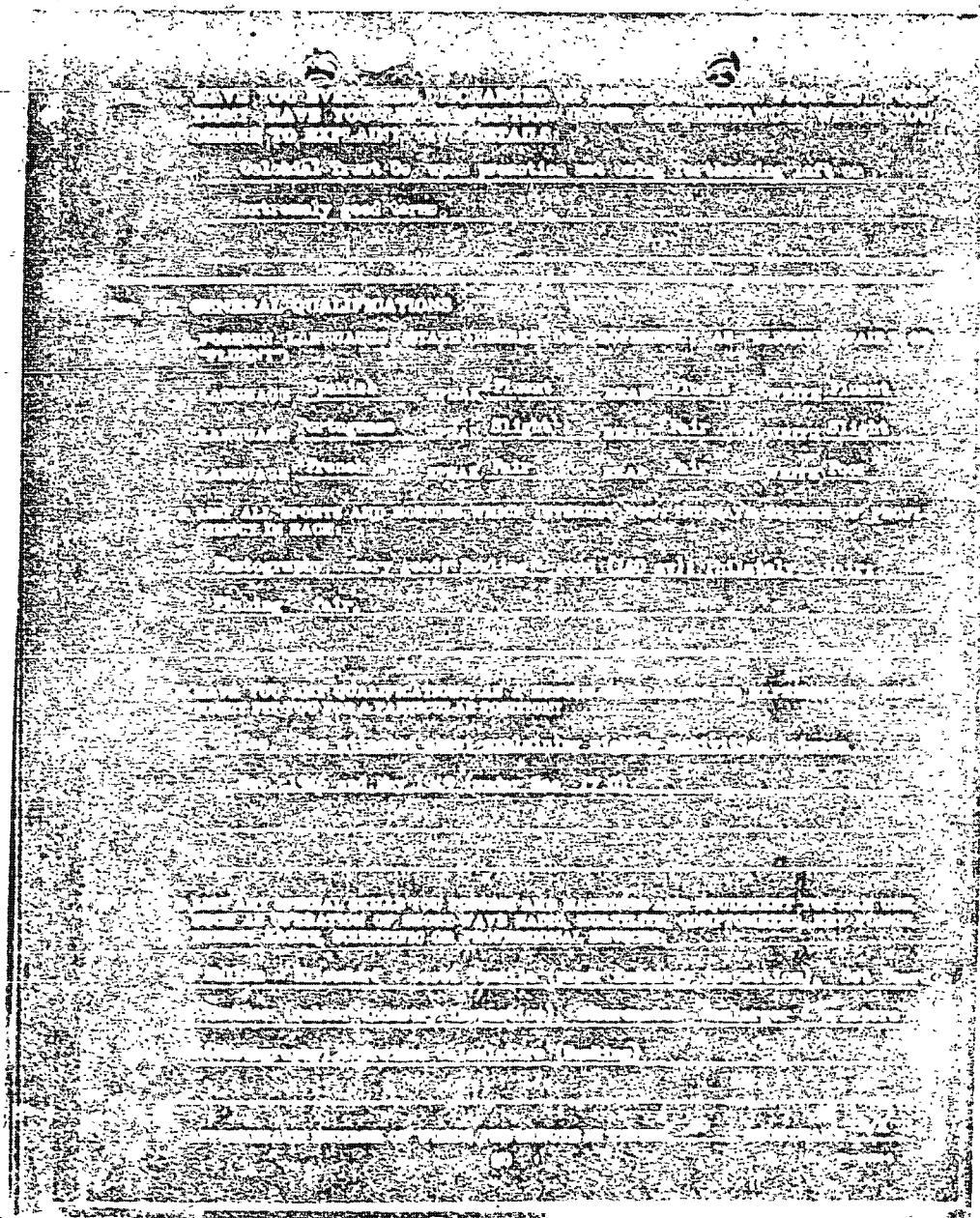


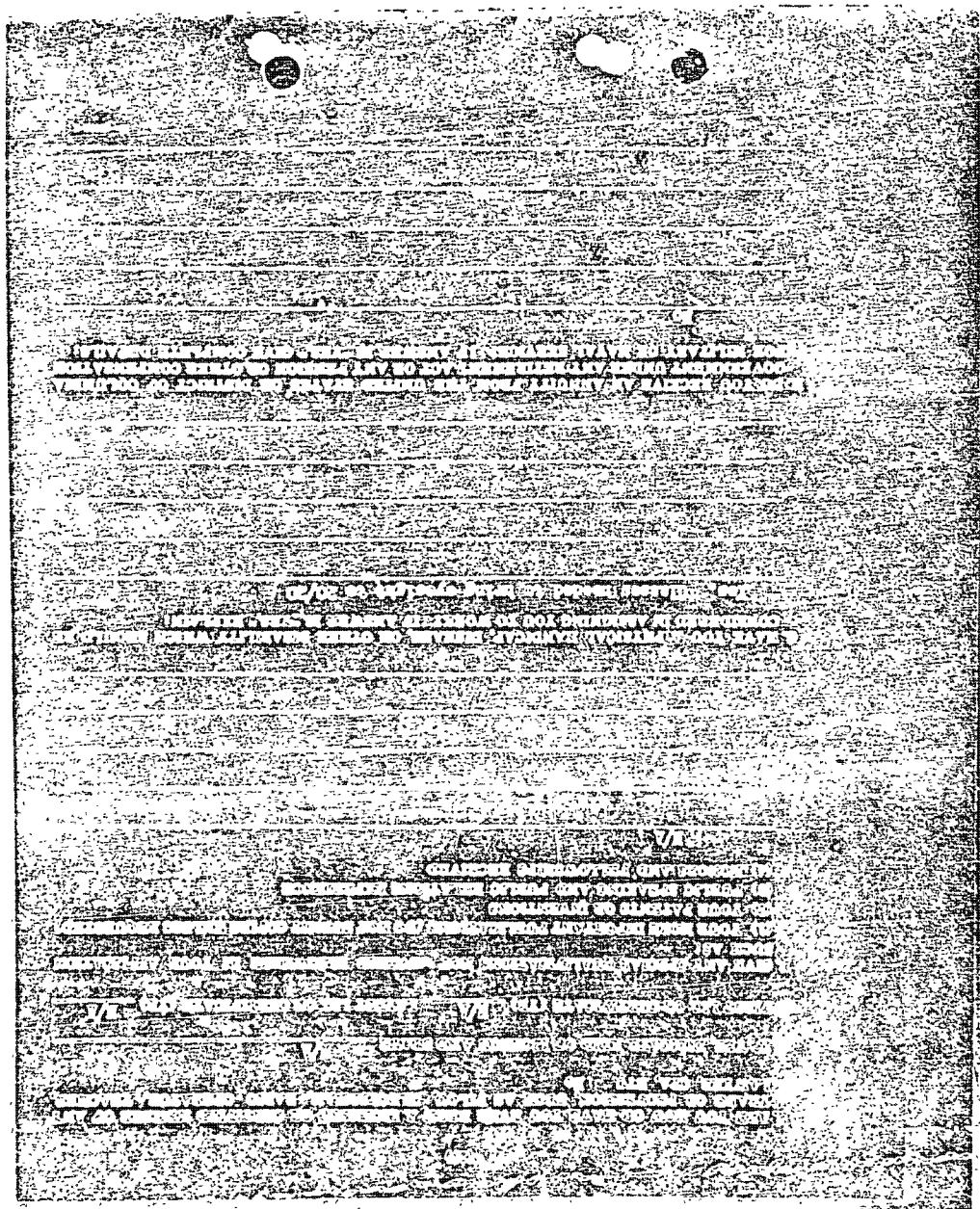


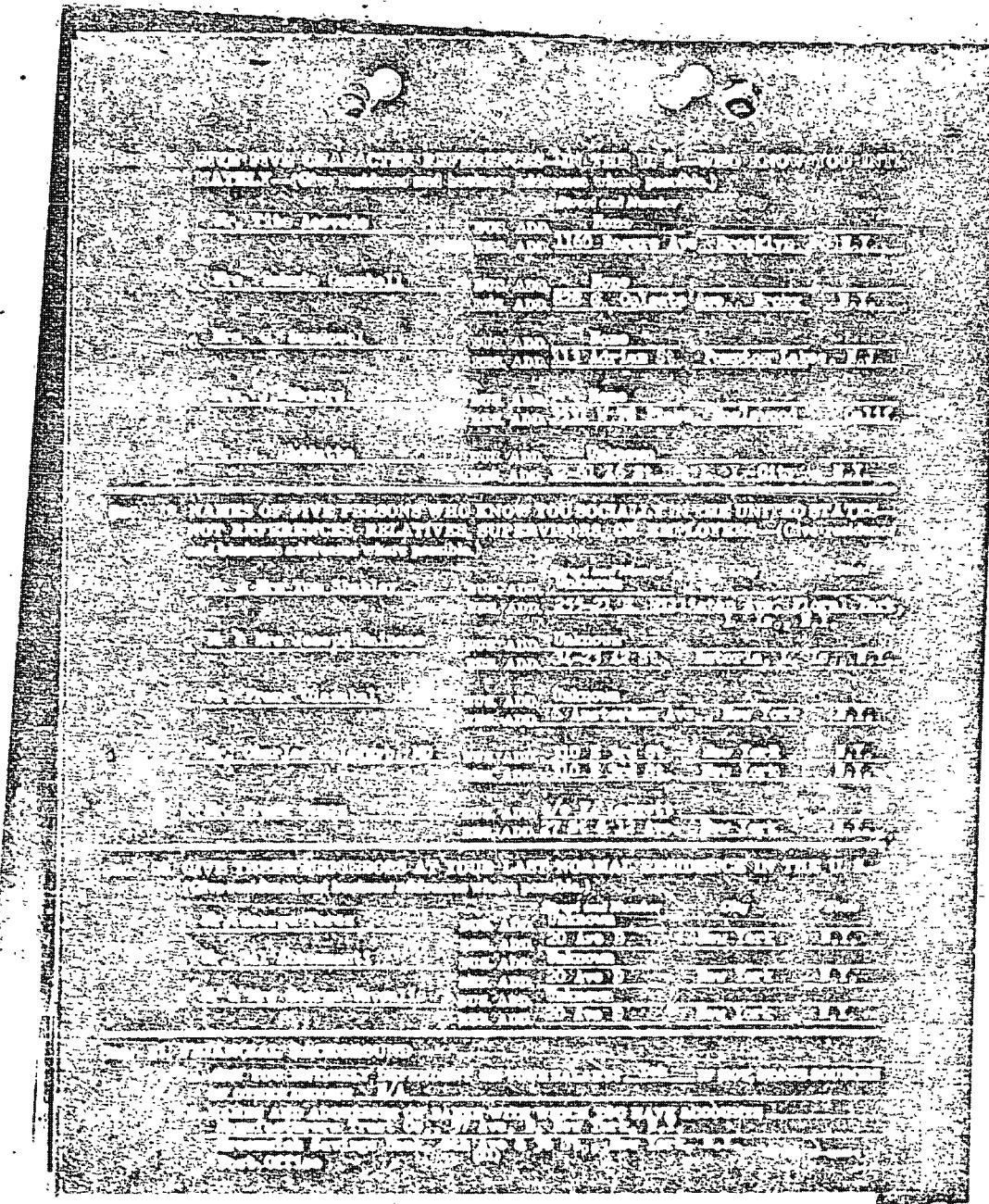


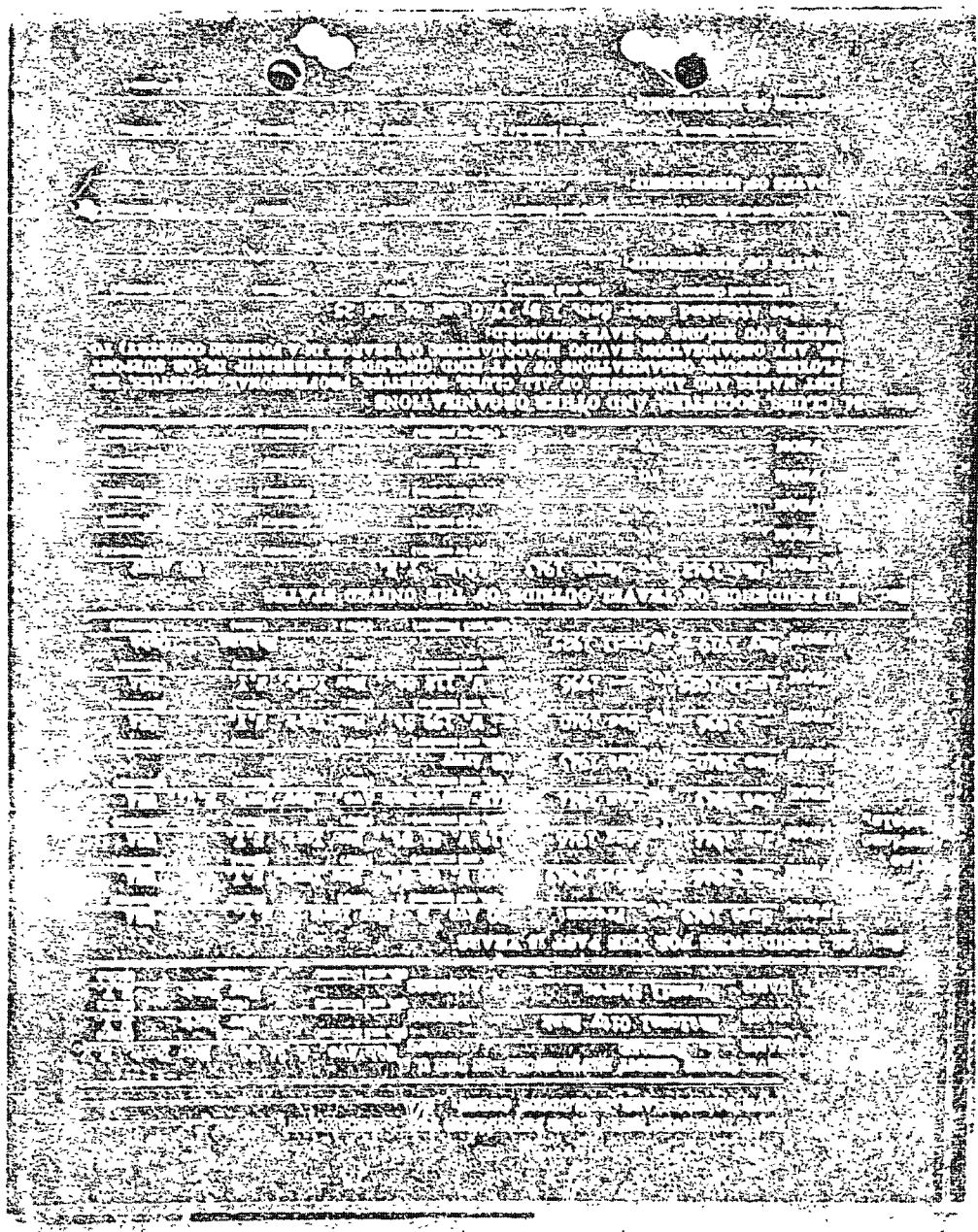
CHRONOLOGICAL RECORD OF EMPLOYMENT FOR PARTIAL PAY ACCOUNT
OF ALL PERIODS. INCLUDE CASUAL EMPLOYMENT. INCLUDE ALSO PERIOD
OF UNEMPLOYMENT. GIVE ADDRESS AND STATE WHAT YOU DID DURING
PERIOD OF UNEMPLOYMENT. USE EAST POINT (1968) FORM

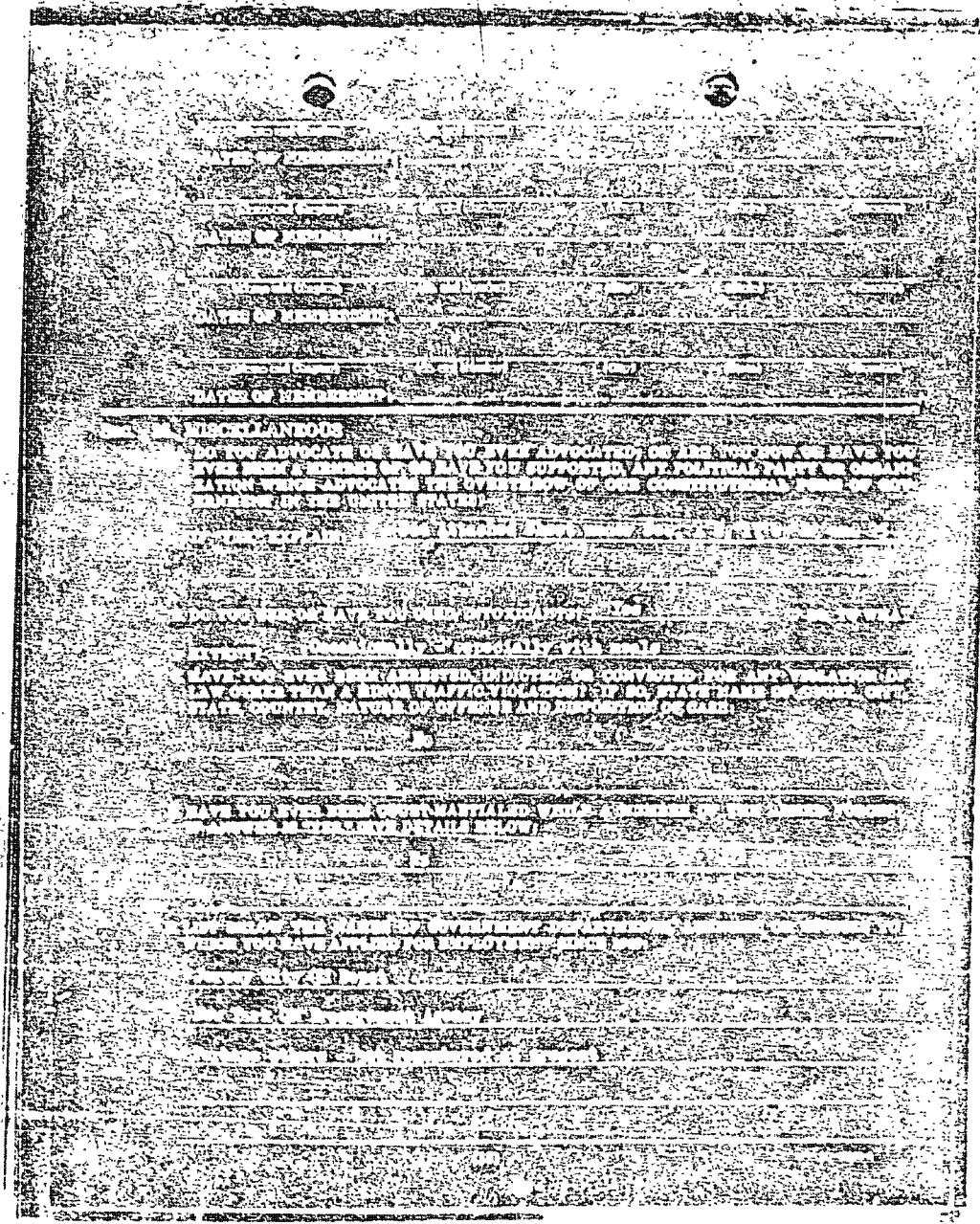


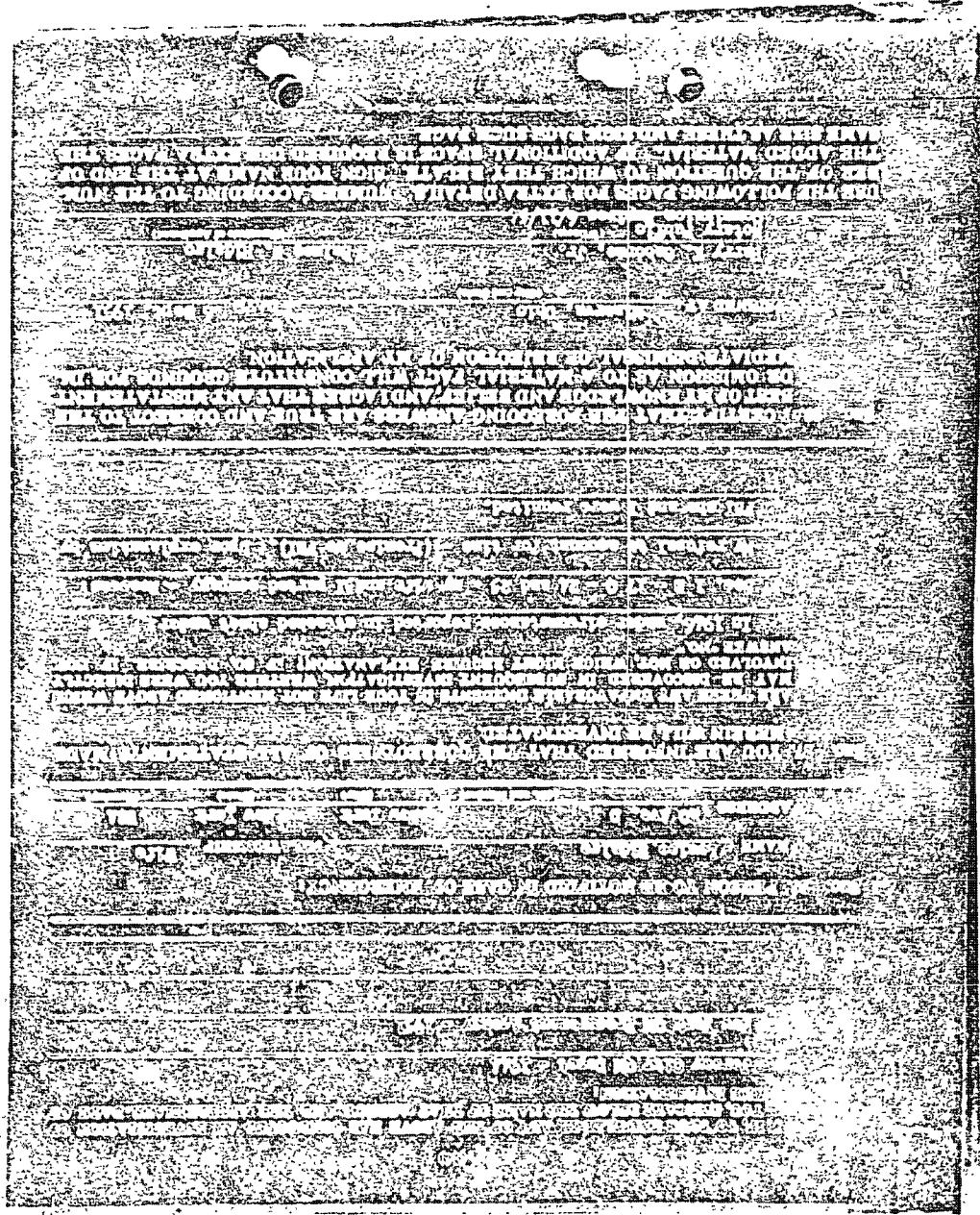


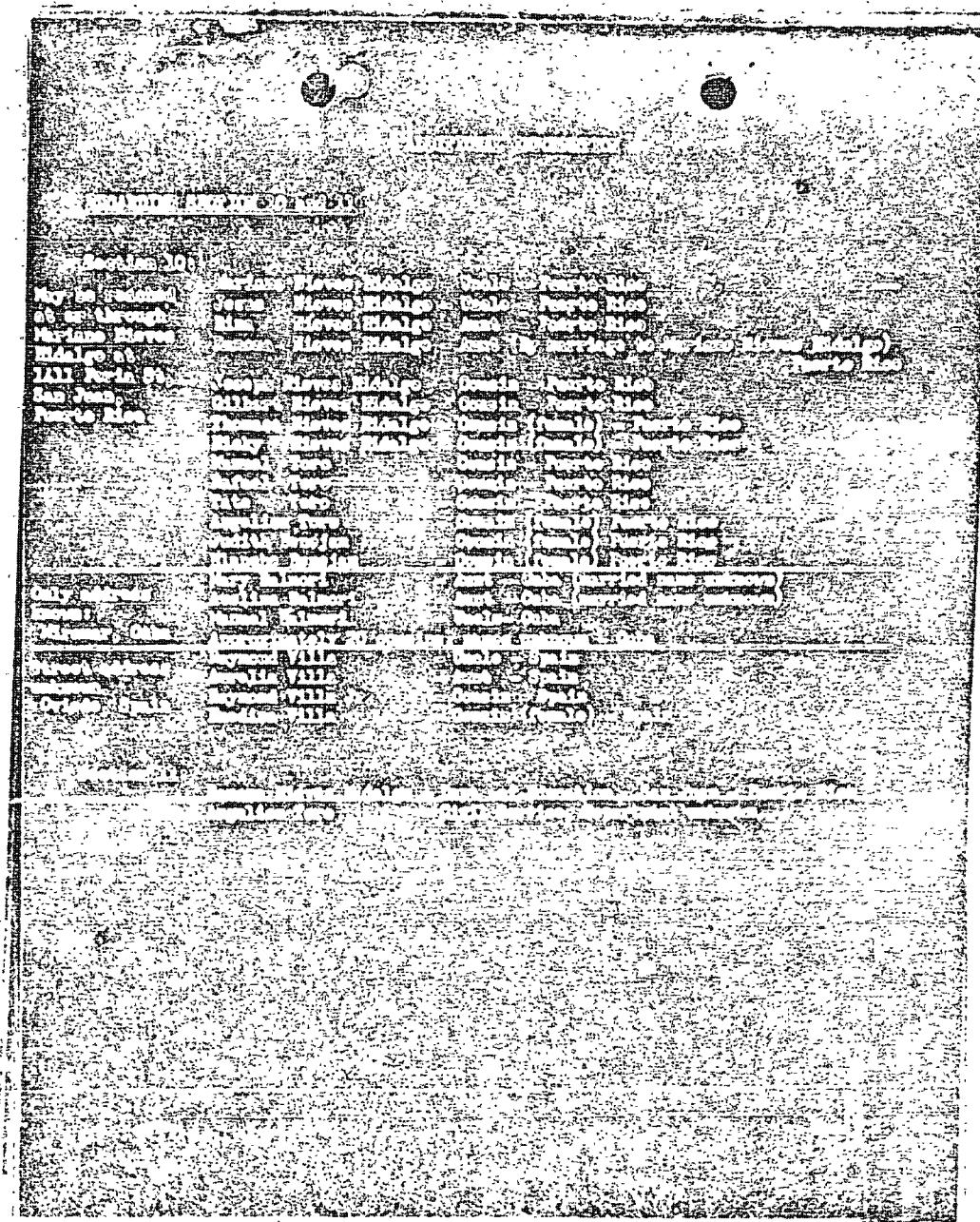


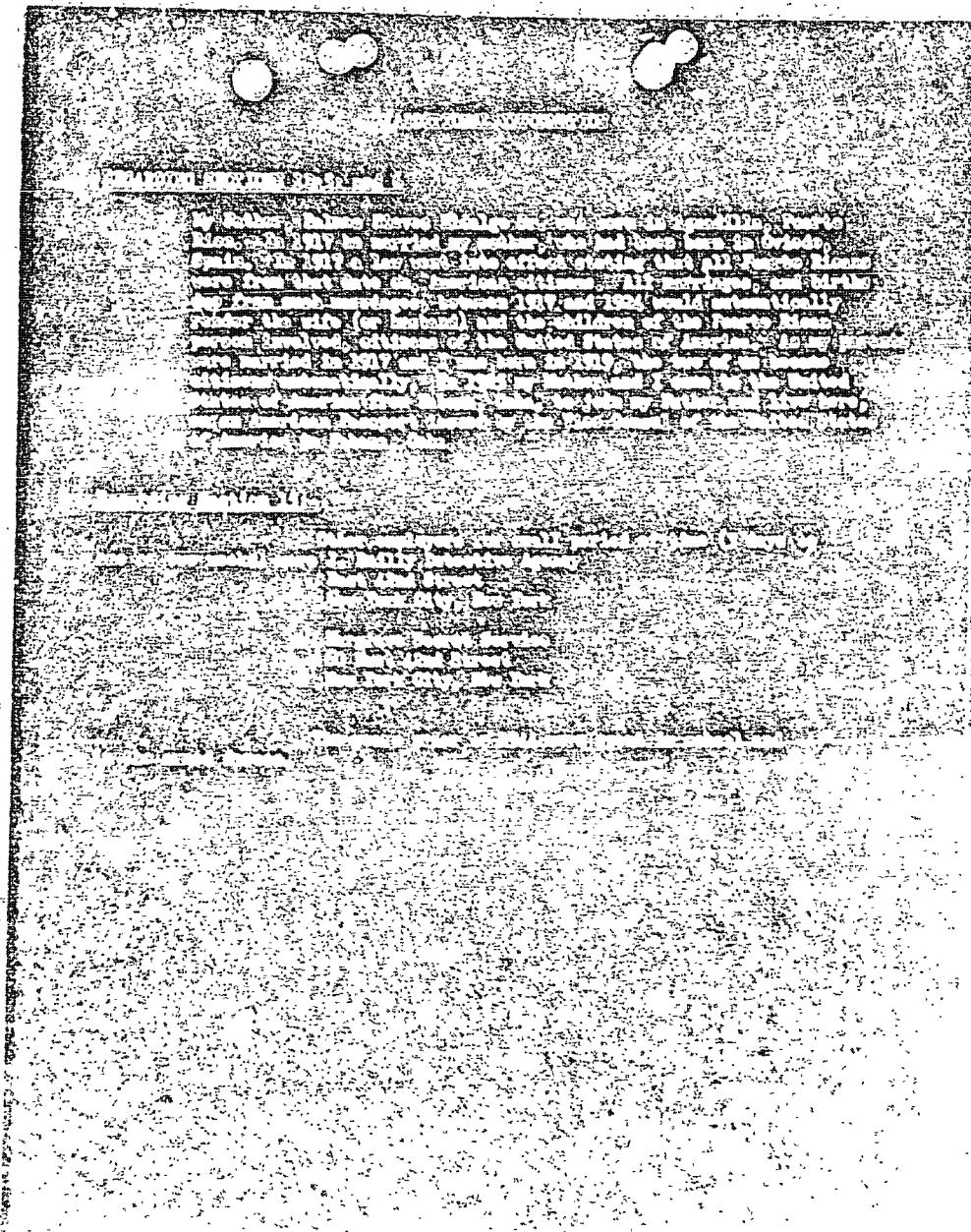


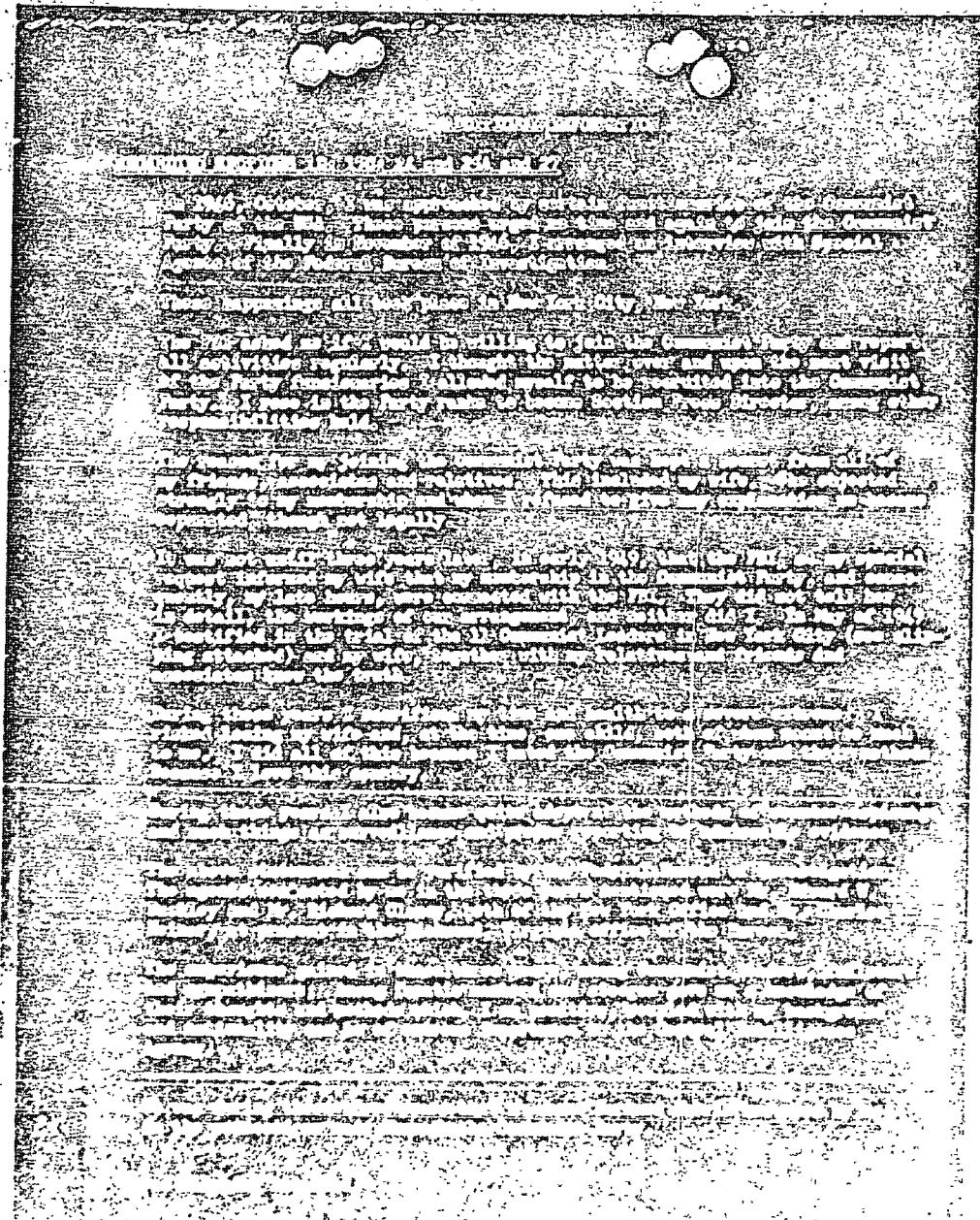












PERSONAL HISTORY STATEMENT

Instructions: 1. Answer all questions completely. If question is not applicable write "NA." Write "unknown" only if you do not know the answer and cannot obtain the answer from personal records. Use the blank pages at the end of this form for extra details on any question or questions for which you do not have sufficient room.

2. Type, print, or write carefully; illegible or incomplete forms will not receive consideration.

HAVE YOU READ AND DO YOU UNDERSTAND THE INSTRUCTIONS?

(Yes or No)

SEC. 1. PERSONAL BACKGROUND

Telephone: NA
Office: NA
Ext. NA
Home: NA

A. FULL NAME Mr. XXX
(Use No. initials)

Ealmes Nieves Fidalgo, Jr.
(First) (Middle) (Last)

PRESENT ADDRESS House number 60, 9th St., East
(St. and Number) (City) (State) (Country)

PERMANENT ADDRESS NA
(St. and Number) (City) (State) (Country)

B. NICKNAME "Barney" "Bain" **WHAT OTHER NAMES HAVE YOU USED?** See remarks

UNDER WHAT CIRCUMSTANCES HAVE YOU EVER USED THESE NAMES? See remarks

HOW LONG? See remarks **IF A LEGAL CHANGE, GIVE PARTICULARS**

No. NA **(Where)** NA **(By what authority)**

C. DATE OF BIRTH 27 May 1919 **PLACE OF BIRTH** Havana, Cuba
(City) (State) (Country)

D. PRESENT CITIZENSHIP U. S. **BY BIRTH?** NA **BY MARRIAGE?** NA
(Country)

BY NATURALIZATION CERTIFICATE NO. NA **ISSUED** NA **BY** NA **(Court)**
(Date)

AT See remarks **(City)** **(State)** **(Country)**

HAVE YOU HAD A PREVIOUS NATIONALITY? NA **No.** NA **(Yes or No)** **(Country)**

HELD BETWEEN WHAT DATES? NA **TO** NA **ANY OTHER NATIONALITY?** NA **(Country)**

GIVE PARTICULARS NA

HAVE YOU TAKEN STEPS TO CHANGE PRESENT CITIZENSHIP? NA **GIVE PARTICULARS:**

NA

(2)

E. IF BORN OUTSIDE U. S. WHEN DID YOU FIRST ARRIVE IN THIS COUNTRY? March 1924PORT OF ENTRY: NYC, NY ON PASSPORT OF WHAT COUNTRY? U. S.LAST U. S. VISA None (Number) (Type) (Place of Issue) (Date of Issue)

SEC. 2. PHYSICAL DESCRIPTION

AGE 38 SEX Male HEIGHT 5' 9 1/2" WEIGHT 145
 EYES Brown HAIR Dark Brown COMPLEXION Dark SCARS under chin
 BUILD slight OTHER DISTINGUISHING FEATURES Mole, Upper left lip

SEC. 3. MARITAL STATUS

A. SINGLE MARRIED DIVORCED WIDOWED

STATE DATE, PLACE, AND REASON FOR ALL SEPARATIONS, DIVORCES OR ANNULMENTS

B. WIFE OR HUSBAND (IF YOU HAVE BEEN MARRIED MORE THAN ONCE—INCLUDING ANNULMENTS—USE A SEPARATE SHEET FOR FORMER WIFE OR HUSBAND GIVING DATA REQUIRED BELOW FOR ALL PREVIOUS MARRIAGES.)

NAME OF SPOUSE Annie (First) Louise (Middle) Beier (Middle) Hidalgo (Last)PLACE AND DATE OF MARRIAGE Belzoni, Mississippi - 9 April 1943HIS(OR HER) ADDRESS BEFORE MARRIAGE Rt. 2, Box 76, Belzoni, Mississippi, USA
 (St. and Number) (City) (State) (Country)LIVING OR DECEASED Living DATE OF DECEASE NA CAUSE NAPRESENT, OR LAST, ADDRESS Same as applicant
 (St. and Number) (City) (State) (Country)DATE OF BIRTH 15 May 1927 PLACE OF BIRTH Morgan City, Mississippi, USA
 (City) (State) (Country)IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY NACITIZENSHIP US WHEN ACQUIRED? Birth WHERE? USA
 (City) (State) (Country)OCCUPATION File Clerk LAST EMPLOYER ClassifiedEMPLOYER'S OR BUSINESS ADDRESS Classified
 (St. and Number) (City) (State) (Country)MILITARY SERVICE FROM NA TO NA BRANCH OF SERVICE NA
 (Date) (Date)COUNTRY NA DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN

NA

SEC. 4. CHILDREN OR DEPENDENTS (Include partial dependents):

1. NAME Ius Maria Hidalgo RELATIONSHIP Daughter AGE 12
 CITIZENSHIP U. S. ADDRESS Same as applicant
 (St. and Number) (City) (State) (Country)

2. NAME Frances Rebecca Hidalgo RELATIONSHIP Daughter AGE 7
 CITIZENSHIP U. S. ADDRESS Same as applicant
 (St. and Number) (City) (State) (Country)

3. NAME _____ RELATIONSHIP _____ AGE _____
 CITIZENSHIP _____ ADDRESS _____
 (St. and Number) (City) (State) (Country)

(also dependent)

SEC. 5. FATHER (Give the same information for stepfather and/or guardian on a separate sheet)

FULL NAME Bulnes Hidalgo Hidalgo
 (First) (Middle) (Last)

LIVING OR DECEASED Living DATE OF DECEASE NA CAUSE NA

PRESENT OR LAST ADDRESS Same as applicant
 (St. and Number) (City) (State) (Country)

DATE OF BIRTH December 1890 PLACE OF BIRTH Aguadilla, Puerto Rico
 (City) (State) (Country)

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY 1923 (March) NYC, NY

CITIZENSHIP U. S. WHEN ACQUIRED? Birth WHERE? Puerto Rico
 (City) (State) (Country)

OCCUPATION Retired LAST EMPLOYER Do not remember

EMPLOYER'S OR OWN BUSINESS ADDRESS None
 (St. and Number) (City) (State) (Country)

MILITARY SERVICE FROM NA TO NA BRANCH OF SERVICE NA
 (Date) (Date)

COUNTRY NA DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN
NA

SEC. 6. MOTHER (Give the same information for stepmother on a separate sheet)

FULL NAME Frances Resario Hidalgo
 (First) (Middle) (Last)

LIVING OR DECEASED Living DATE OF DECEASE NA CAUSE NA

PRESENT OR LAST ADDRESS Same as applicant
 (St. and Number) (City) (State) (Country)

DATE OF BIRTH 12 Jan. 1892 PLACE OF BIRTH Oviedo, Spain

CITIZENSHIP U. S. WHEN ACQUIRED? 1917 WHERE? Havana, Cuba
 (City) (State) (Country)

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY March 1924, NYC, NY, USA

(4)

OCCUPATION Retired LAST EMPLOYER Leonid De Leocinskis
 EMPLOYER'S OR OWN BUSINESS ADDRESS 48 Ste NYC, NY
 (St. and Number) (City) (State) (Country)
 MILITARY SERVICE FROM NA TO NA BRANCH OF SERVICE NA
 COUNTRY NA DETAILS OF OTHER GOVT. SERVICE, U. S. OR FOREIGN
NA

SEC. 7. BROTHERS AND SISTERS (Including half-, step-, and adopted brothers and sisters):

1. FULL NAME (First) (Middle) (Last) AGE
 PRESENT ADDRESS (St. and Number) (City) (State) (Country) (Citizenship)
 2. FULL NAME (First) (Middle) (Last) AGE
 PRESENT ADDRESS (St. and Number) (City) (State) (Country) (Citizenship)
 3. FULL NAME (First) (Middle) (Last) AGE
 PRESENT ADDRESS (St. and Number) (City) (State) (Country) (Citizenship)
 4. FULL NAME (First) (Middle) (Last) AGE
 PRESENT ADDRESS (St. and Number) (City) (State) (Country) (Citizenship)
 5. FULL NAME (First) (Middle) (Last) AGE
 PRESENT ADDRESS (St. and Number) (City) (State) (Country) (Citizenship)

SEC. 8. FATHER-IN-LAW

FULL NAME Henry Bo Peter
 (First) (Middle) (Last)
 LIVING OR DECEASED Living DATE OF DECEASE NA CAUSE NA
 PRESENT, OR LAST, ADDRESS 210 California Avenue, Leland, Mississippi, USA
 (St. and Number) (City) (State) (Country)
 DATE OF BIRTH 1895 PLACE OF BIRTH USA
 IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY NA
 CITIZENSHIP US WHEN ACQUIRED? Birth WHERE? USA
 (City) (State) (Country)
 OCCUPATION Laborer LAST EMPLOYER Unknown
 10-2028-1

SEC. 9. MOTHER-IN-LAW

FULL NAME Frances Rebecca Belor
 (First) (Middle) (Last)

LIVING OR DECEASED LIVING DATE OF DECEASE NA CAUSE NA

PRESENT, OR LAST, ADDRESS 210 California Avenue, Leland, Mississippi, USA
 (St. and Number) (City) (State) (Country)

DATE OF BIRTH 1893 PLACE OF BIRTH USA

IF BORN OUTSIDE U. S. INDICATE DATE AND PLACE OF ENTRY NA

CITIZENSHIP U. S. WHEN ACQUIRED? Birth WHERE? U.S.A.
 (City) (State) (Country)

OCCUPATION Housewife LAST EMPLOYER NA

SEC. 10. RELATIVES BY BLOOD, MARRIAGE OR ADOPTION, WHO EITHER LIVE ABROAD OR WHO ARE NOT CITIZENS OF THE UNITED STATES:

See remarks

1. NAME	RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS (St. and Number) (City) (State) (Country)	
2. NAME	RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS (St. and Number) (City) (State) (Country)	
3. NAME	RELATIONSHIP	AGE
CITIZENSHIP	ADDRESS (St. and Number) (City) (State) (Country)	

SEC. 11. RELATIVES BY BLOOD OR MARRIAGE IN THE MILITARY OR CIVIL SERVICE OF THE U. S. OR OF A FOREIGN GOVERNMENT:

NONE	1. NAME	RELATIONSHIP	AGE
	CITIZENSHIP	ADDRESS (St. and Number) (City) (State) (Country)	
	TYPE AND LOCATION OF SERVICE (IF KNOWN)		
	2. NAME	RELATIONSHIP	AGE
	CITIZENSHIP	ADDRESS (St. and Number) (City) (State) (Country)	
	TYPE AND LOCATION OF SERVICE (IF KNOWN)		
	3. NAME	RELATIONSHIP	AGE
	CITIZENSHIP	ADDRESS (St. and Number) (City) (State) (Country)	
	TYPE AND LOCATION OF SERVICE (IF KNOWN)		

SEC. 12. POSITION DATA

A. KIND OF POSITION APPLIED FOR See covering dispatch reference

B. WHAT IS THE LOWEST ANNUAL ENTRANCE SALARY YOU WILL ACCEPT? \$5300.00 P/A
(You Will Not Be Considered For Any Position With A Lower Entrance Salary.)

C. IF YOU ARE WILLING TO TRAVEL, SPECIFY: OCCASIONALLY Yes
FREQUENTLY CONSTANTLY

D. CHECK IF YOU WILL ACCEPT APPOINTMENT, IF OFFERED: IN WASHINGTON, D. C.
ANYWHERE IN THE UNITED STATES OUTSIDE THE UNITED STATES

E. IF YOU WILL ACCEPT APPOINTMENT IN CERTAIN LOCATIONS ONLY, SPECIFY LOCATIONS:

SEC. 13. EDUCATION

ELEMENTARY SCHOOL	St. Thomas Apostle	ADDRESS	NYC	NY	USA
		(City)	(State)	(Country)	
DATES ATTENDED	1926-1934	GRADUATE?	Yes		
HIGH SCHOOL	La Salle Academy	ADDRESS	2nd St. and 2nd Avenue	NYC	USA
		(City)	(State)	(Country)	
DATES ATTENDED	1936-1940	GRADUATE?	Yes		
COLLEGE	NY University	ADDRESS	Washington Square	NYC	USA
	Foreign Trade and	(City)	(State)	(Country)	
MAJOR AND SPECIALTY	Business Law	YEARS COMPLETED	Two (Night School)		
DATES ATTENDED	1944-1945	DEGREE	No		
COLLEGE	.....	ADDRESS	.....	.....	.....
MAJOR AND SPECIALTY	.....	YEARS COMPLETED	.....	.....	.....
DATES ATTENDED	.....	DEGREE	.....	.....	.....
CHIEF UNDERGRADUATE COLLEGE SUBJECTS	.....	.....	.....	.....	.....
CHIEF GRADUATE COLLEGE SUBJECTS	.....	.....	.....	.....	.....

SEC. 14. ACTIVE U. S. OR FOREIGN MILITARY SERVICE

U. S.	Army	Cpl.	1940-1943
(Country)	(Service)	(Rank)	(Dates of Service)
Camp Hale, Colorado	202 19768	Honorably	(Type of Discharge)
(Last Station)	(Serial Number)		

REMARKS: None

Do not remember
SELECTIVE SERVICE BOARD NUMBER

ADDRESS

IF DEFERRED GIVE REASON

NA

INDICATE MEMBERSHIP IN MILITARY RESERVE ORGANIZATIONS

NA

SEC. 15. CHRONOLOGICAL HISTORY OF EMPLOYMENT FOR PAST 15 YEARS. ACCOUNT FOR ALL PERIODS. INCLUDE CASUAL EMPLOYMENT. INCLUDE ALSO PERIODS OF UNEMPLOYMENT. GIVE ADDRESSES AND STATE WHAT YOU DID DURING PERIODS OF UNEMPLOYMENT. LIST LAST POSITION FIRST. (List all civilian employment by a foreign government, regardless of dates.)

FROM Feb. 1952

TO Present

CLASSIFICATION GRADE

(IF IN FEDERAL SERVICE) GS-11

EMPLOYING FIRM OR AGENCY

See covering dispatch reference

ADDRESS

See covering dispatch reference

(St. and Number)

(City)

(State)

(Country)

KIND OF BUSINESS U. S. Govt.

NAME OF SUPERVISOR

See covering dispatch

TITLE OF JOB

See covering dispatch

SALARY \$6390.00

PER annum

YOUR DUTIES

See covering dispatch reference

REASONS FOR LEAVING

FROM January 1951

TO February 1952

CLASSIFICATION GRADE

(IF IN FEDERAL SERVICE) GS-7

EMPLOYING FIRM OR AGENCY

NY G. Procurement Agency

ADDRESS

111 East 16th Street

NYC, NY, USA

(St. and Number)

(City)

(State)

(Country)

KIND OF BUSINESS U. S. Govt.

NAME OF SUPERVISOR Do not remember

TITLE OF JOB

Inspector

SALARY \$3825.00

PER annum

YOUR DUTIES

Inspecting material being purchased by U. S. Govt. specifically

the U. S. Army

REASONS FOR LEAVING To obtain present position

(8)

FROM July 1950 TO January 1951 CLASSIFICATION GRADE NA (IF IN FEDERAL SERVICE)EMPLOYING FIRM OR AGENCY American Trust CompanyADDRESS Wall Street, New York City, NY, USA
(St. and Number) (City) (State) (Country)KIND OF BUSINESS Banking NAME OF SUPERVISOR Do not rememberTITLE OF JOB Collections clerk SALARY \$50.00 PER weekYOUR DUTIES Export banking clerical workREASONS FOR LEAVING Left for higher paying workFROM January 1948 TO May 1950 CLASSIFICATION GRADE NA (IF IN FEDERAL SERVICE)EMPLOYING FIRM OR AGENCY Colonial Trust CompanyADDRESS 6th Avenue and 45th Street, NYC, NY, USA
(St. and Number) (City) (State) (Country)KIND OF BUSINESS Banking NAME OF SUPERVISOR Do not rememberTITLE OF JOB Collections clerk SALARY \$50.00 PER weekYOUR DUTIES Export banking clerical workREASONS FOR LEAVING Promised promotion failed to materializeFROM August 1945 TO September 1947 CLASSIFICATION GRADE NA (IF IN FEDERAL SERVICE)EMPLOYING FIRM OR AGENCY Francis H. Leggett Inc.ADDRESS 28th Street and 12th Avenue, NYC, NY, USA
(St. and Number) (City) (State) (Country)KIND OF BUSINESS Wholesale NAME OF SUPERVISOR Do not remember
Grocery houseTITLE OF JOB Correspondence clerk SALARY \$57.00 PER weekYOUR DUTIES Export correspondence clerical dutiesREASONS FOR LEAVING Disatisfied with type of work

10-2225-1

SEC. 16. HAVE YOU EVER BEEN DISCHARGED OR ASKED TO RESIGN FROM ANY POSITION? HAVE YOU LEFT A POSITION UNDER CIRCUMSTANCES WHICH YOU DESIRE TO EXPLAIN? GIVE DETAILS:

No _____

SEC. 17. GENERAL QUALIFICATIONS

A. FOREIGN LANGUAGES (STATE DEGREE OR PROFICIENCY AS "SLIGHT," "FAIR," OR "FLUENT")

LANGUAGE Spanish SPEAK Fluent READ Fluent WRITE Fluent

LANGUAGE Portuguese SPEAK Slight READ Fair WRITE Slight

LANGUAGE SPEAK READ WRITE

B. LIST ALL SPORTS AND Hobbies WHICH INTEREST YOU: INDICATE DEGREE OF PROFICIENCY IN EACH:

Judo - Have attained "yellow belt" rank

Photography - Very good degree of proficiency

Bowling - Fair degree of proficiency

Philately - Fair degree of proficiency

Fishing (no comment)

C. HAVE YOU ANY QUALIFICATIONS, AS A RESULT OF TRAINING OR EXPERIENCE, WHICH MIGHT FIT YOU FOR A PARTICULAR POSITION?

Yes, See covering dispatch reference.

D. LIST ANY SPECIAL SKILLS YOU POSSESS AND MACHINES AND EQUIPMENT YOU CAN USE, SUCH AS OPERATION OF SHORT-WAVE RADIO, MULTILITH, COMPTOMETER, KEY PUNCH, TURRET LATHE, SCIENTIFIC OR PROFESSIONAL DEVICES:

All photographic devices.

APPROXIMATE NUMBER OF WORDS PER MINUTE IN TYPING 30 SHORTHAND 0

(10)

E. ARE YOU NOW OR HAVE YOU EVER BEEN A LICENSED OR CERTIFIED MEMBER OF ANY TRADE OR PROFESSION, SUCH AS PILOT, ELECTRICIAN, RADIO OPERATOR, TEACHER, LAWYER, CPA, ETC.

IF YES, INDICATE KIND OF LICENSE AND STATE No

FIRST LIC. OR CERTIFICATE (YR) LATEST LIC. OR CERTIFICATE (YR)

F. GIVE ANY SPECIAL QUALIFICATIONS NOT COVERED ELSEWHERE IN YOUR APPLICATION (SUCH AS:

- (1) YOUR MORE IMPORTANT PUBLICATIONS (DO NOT SUBMIT COPIES UNLESS REQUESTED)
- (2) YOUR PATENTS OR INVENTIONS
- (3) PUBLIC SPEAKING AND PUBLIC RELATIONS EXPERIENCE
- (4) HONORS AND FELLOWSHIPS RECEIVED

NA

G. HAVE YOU A PHYSICAL HANDICAP, DISEASE, OR OTHER DISABILITY WHICH SHOULD BE CONSIDERED IN ASSIGNING YOU TO WORK? IF ANSWER IS "YES," EXPLAIN:

Yes. I must wear glasses continually.

H. DO YOU RECEIVE AN ANNUITY FROM THE UNITED STATES OR DISTRICT OF COLUMBIA GOVERNMENT UNDER ANY RETIREMENT ACT OR ANY PENSION OR OTHER COMPENSATION FOR MILITARY OR NAVAL SERVICE? IF ANSWER IS "YES," GIVE COMPLETE DETAILS:

No

SEC. 18. GIVE FIVE CHARACTER REFERENCES—IN THE U. S.—WHO KNOW YOU INTIMATELY—(Give residence and business addresses where possible.)

		Street and Number	City	State
1.	Edward Lee Anderson	BUS. ADD. See Dispatch reference. RES. ADD.		
2.	Willard Galbraith	BUS. ADD. " " " RES. ADD.		
3.	Homer Neal	BUS. ADD. " " " RES. ADD.		
4.	Andres Rivera	BUS. ADD. " " " RES. ADD.		
5.	Joseph Sancho	BUS. ADD. " " " RES. ADD.		

SEC. 19. NAMES OF FIVE PERSONS WHO KNOW YOU SOCIALLY IN THE UNITED STATES—NOT REFERENCES, RELATIVES, SUPERVISORS, OR EMPLOYERS—(Give residence and business addresses where possible.)

See remarks		Street and Number	City	State
	1.	BUS. ADD. RES. ADD.		
	2.	BUS. ADD. RES. ADD.		
	3.	BUS. ADD. RES. ADD.		
	4.	BUS. ADD. RES. ADD.		
	5.	BUS. ADD. RES. ADD.		

SEC. 20. GIVE THREE NEIGHBORS AT YOUR LAST NORMAL RESIDENCE IN THE U. S.—(Give residence and business addresses where possible.)

See remarks		Street and Number	City	State
	1.	BUS. ADD. RES. ADD.		
	2.	BUS. ADD. RES. ADD.		
	3.	BUS. ADD. RES. ADD.		

SEC. 21. FINANCIAL BACKGROUND

A. ARE YOU ENTIRELY DEPENDENT ON YOUR SALARY? Yes... IF NOT, STATE SOURCES OF OTHER INCOME
 B. NAMES AND ADDRESSES OF BANKS WITH WHICH YOU HAVE ACCOUNTS Greenwich Savings Bank, 36th St. and Broadway and 6th Avenue, NYC, NY.

(12)

C. HAVE YOU EVER BEEN IN, OR PETITIONED FOR, BANKRUPTCY? No
 GIVE PARTICULARS, INCLUDING COURT: _____

D. GIVE THREE CREDIT REFERENCES--IN THE U. S.

1. NAME	ADDRESS	(St. and Number)	(City)	(State)
2. NAME	ADDRESS	(St. and Number)	(City)	(State)
3. NAME	ADDRESS	(St. and Number)	(City)	(State)

SEC. 22. RESIDENCES FOR THE PAST 15 YEARS

FROM April 1952 to Present		(St. and number)	(City)	(State)	(Country)
FROM 1949 to 1952	20 Ave. D, NYC, NY, USA	(St. and number)	(City)	(State)	(Country)
FROM 1944 to 1948	200 West 82nd St., NYC, NY, USA	(St. and number)	(City)	(State)	(Country)
FROM _____ to _____		(St. and number)	(City)	(State)	(Country)
FROM _____ to _____		(St. and number)	(City)	(State)	(Country)
FROM _____ to _____		(St. and number)	(City)	(State)	(Country)
FROM _____ to _____		(St. and number)	(City)	(State)	(Country)
FROM _____ to _____		(St. and number)	(City)	(State)	(Country)

SEC. 23. RESIDENCE OR TRAVEL OUTSIDE OF THE UNITED STATES

A. FROM 1919 to 1924	Havana, Cuba	Country of birth	
	(City or section)	(Country)	(Purpose)
FROM 1942 to 1943	Pacific area	US Army	
	(City or section)	(Country)	(Purpose)
FROM 1952 to Present	Republic of Panama	WORK	
	(City or section)	(Country)	(Purpose)
FROM _____ to _____		(Country)	(Purpose)
FROM _____ to _____		(Country)	(Purpose)

SEC. 24. CLUBS, SOCIETIES, AND OTHER ORGANIZATIONS

LIST NAMES AND ADDRESSES OF ALL CLUBS, SOCIETIES, PROFESSIONAL SOCIETIES, EMPLOYEE GROUPS, ORGANIZATIONS OF ANY KIND (INCLUDE MEMBERSHIP IN, OR SUPPORT OF, ANY ORGANIZATION HAVING HEADQUARTERS OR BRANCH IN A FOREIGN COUNTRY) TO WHICH YOU BELONG OR HAVE BELONGED:

1. None
 (Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP: _____

2. _____
 (Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP: _____

3. _____
 (Name and Chapter) (St. and Number) (City) (State) (Country)

DATES OF MEMBERSHIP: _____

4. _____ (Name and Chapter) _____ (St. and Number) _____ (City) _____ (State) _____ (Country)

DATES OF MEMBERSHIP: _____

5. _____ (Name and Chapter) _____ (St. and Number) _____ (City) _____ (State) _____ (Country)

DATES OF MEMBERSHIP: _____

6. _____ (Name and Chapter) _____ (St. and Number) _____ (City) _____ (State) _____ (Country)

DATES OF MEMBERSHIP: _____

7. _____ (Name and Chapter) _____ (St. and Number) _____ (City) _____ (State) _____ (Country)

DATES OF MEMBERSHIP: _____

SEC. 25. MISCELLANEOUS

A. DO YOU ADVOCATE OR HAVE YOU EVER ADVOCATED; OR ARE YOU NOW OR HAVE YOU EVER BEEN A MEMBER OF, OR HAVE YOU SUPPORTED, ANY POLITICAL PARTY OR ORGANIZATION WHICH ADVOCATES THE OVERTHROW OF OUR CONSTITUTIONAL FORM OF GOVERNMENT IN THE UNITED STATES?

IF "YES," EXPLAIN: _____ NO (See remarks) _____

B. DO YOU USE, OR HAVE YOU USED, INTOXICANTS? _____ Yes _____ IF SO, TO WHAT

EXTENT? _____ Poor with scales _____

C. HAVE YOU EVER BEEN ARRESTED, INDICTED OR CONVICTED FOR ANY VIOLATION OF LAW OTHER THAN A MINOR TRAFFIC VIOLATION? IF SO, STATE NAME OF COURT, CITY, STATE, COUNTRY, NATURE OF OFFENSE AND DISPOSITION OF CASE:

D. HAVE YOU EVER BEEN COURT-MARTIALED WHILE A MEMBER OF THE ARMED FORCES? IF ANSWER IS "YES," GIVE DETAILS BELOW:

E. LIST BELOW THE NAMES OF GOVERNMENT DEPARTMENTS, AGENCIES OR OFFICES TO WHICH YOU HAVE APPLIED FOR EMPLOYMENT SINCE 1940:

Department of Defense _____

Present Organization _____

(14)

IF, TO YOUR KNOWLEDGE, ANY OF THE ABOVE HAS CONDUCTED AN INVESTIGATION OF YOU, INDICATE BELOW THE NAME OF THAT AGENCY AND THE APPROXIMATE DATE OF THE INVESTIGATION:

Federal Bureau of Investigation - 1946

This Organization - 1951

SEC. 26. PERSON TO BE NOTIFIED IN CASE OF EMERGENCY:

NAME Annie Louise Ridgely RELATIONSHIP wife

ADDRESS Same as applicant (Street Number) (City) (State) (Country)

SEC. 27. YOU ARE INFORMED THAT THE CORRECTNESS OF ALL STATEMENTS MADE HEREIN WILL BE INVESTIGATED.

ARE THERE ANY UNFAVORABLE INCIDENTS IN YOUR LIFE NOT MENTIONED ABOVE WHICH MAY BE DISCOVERED IN SUBSEQUENT INVESTIGATION, WHETHER YOU WERE DIRECTLY INVOLVED OR NOT, WHICH MIGHT REQUIRE EXPLANATION? IF SO, DESCRIBE. IF NOT, ANSWER "NO."

No

SEC. 28. I CERTIFY THAT THE FOREGOING ANSWERS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, AND I AGREE THAT ANY MISSTATEMENT OR OMISSION AS TO A MATERIAL FACT WILL CONSTITUTE GROUNDS FOR IMMEDIATE DISMISSAL OR REJECTION OF MY APPLICATION.

SIGNED AT Ft. Meade, Canal Zone DATE 19 July 1951
(City and State)

John W. Ridgely
(Witness)

Annie L. Ridgely
(Signature of Applicant)

USE THE FOLLOWING PAGES FOR EXTRA DETAILS. NUMBER ACCORDING TO THE NUMBER OF THE QUESTION TO WHICH THEY RELATE. SIGN YOUR NAME AT THE END OF THE ADDED MATERIAL. IF ADDITIONAL SPACE IS REQUIRED USE EXTRA PAGES THE SAME SIZE AS THESE AND SIGN EACH SUCH PAGE.

14-00000

Section 1A - While an undercover agent for the Federal Bureau of Investigations from 1946 to 1949 I used the name of Bernard Harris to members of the Communist Party of the United States. This information is already on file in this organization.

Section 1D - I became an American citizen at birth through the citizenship of my father. This information is already on file in this organization.

Section 3B - My wife is employed by this organization.

Section 10 - I have many relatives in Spain and Cuba but do not correspond with them and so do not know names, addresses or present status.

Section 18 - All persons mentioned in this section are employees of this organization.

Sections 19

and 20 - Not having lived in the USA for over five years I have lost all contact with old friends, neighbors, etc. I do not know their addresses, status, etc., at this time.

Section 25 - My past connections with any subversive groups and the reasons for such connections is already on file in the files of this organization.

14-00000

RECORD OF
PREVIOUS GOVERNMENT
SERVICE RETURNED TO
FEDERAL RECORDS CENTER IN
ST. LOUIS, MO.

DATE July 1971